

Appendix 1

**Administrative Compliance Order
AES-PR Coal Fired Power Plant
Docket Number CWA-02-2012-3100**

**Comprehensive Annual Evaluation
December 2014**

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
WASHINGTON, DC 20460

Annual Reporting Form

A. GENERAL INFORMATION

1. Facility Name: A E S P R

2. NPDES Permit Tracking No.: P R R 0 5 B L 6 5

3. Facility Physical Address:

a. Street: K M 1 4 2 S T A T E R O A D P R - 3

b. City: G U A Y A M A c. State: P R d. Zip Code: 0 0 7 8 4 -

4. Lead Inspectors Name: H E C T O R M A V I L A Title: E N V I R O N M E N T A L C O O R D

Additional Inspectors Name(s):

5. Contact Person: H E C T O R M A V I L A Title: E N V I R O N M E N T A L C O O R D

Phone: 7 8 7 - 8 6 6 - 8 1 1 7 Ext. 2 2 6 6 E-mail: h e c t o r . a v i l a @ a e s . c o m

6. Inspection Date: 1 2 / 1 6 / 2 0 1 4

B. GENERAL INSPECTION FINDINGS

1. As part of this comprehensive site inspection, did you inspect all potential pollutant sources, including areas where industrial activity may be exposed to stormwater?
☒ YES ☐ NO

If NO, describe why not:

NOTE: Complete Section C of this form for each industrial activity area inspected and included in your SWPPP or as newly identified in B.2 or B.3 below where pollutants may be exposed to stormwater.2. Did this inspection identify any stormwater or non-stormwater outfalls not previously identified in your SWPPP? ☐ YES ☒ NO

If YES, for each location, describe the sources of those stormwater and non-stormwater discharges and any associated control measures in place:

3. Did this inspection identify any sources of stormwater or non-stormwater discharges not previously identified in your SWPPP? ☒ YES ☐ NO

If YES, describe these sources of stormwater or non-stormwater pollutants expected to be present in these discharges, and any control measures in place:

Outfall 002 may receive sediment tracking from outside unpaved road when trucks access through south gate (gate #3). Control measures are under evaluation to be implemented.

4. Did you review stormwater monitoring data as part of this inspection to identify potential pollutant hot spots? ☒ YES ☐ NO ☐ NA, no monitoring performed

If YES, summarize the findings of that review and describe any additional inspection activities resulting from this review:

Review of monitoring data did not result in identification of additional pollutant hot spots.

5. Describe any evidence of pollutants entering the drainage system or discharging to surface waters, and the condition of and around outfalls, including flow dissipation measures to prevent scouring:

Pollutants may be discharging to surface waters at outfall 002 from truck tracking sediment coming from outside unpaved road.

6. Have you taken or do you plan to take any corrective actions, as specified in Part 3 of the permit, since your last annual report submission (or since you received authorization to discharge under this permit if this is your first annual report), including any corrective actions identified as a result of this annual comprehensive site inspection?

☒ YES ☐ NO

If YES, how many conditions requiring review for correction action as specified in Parts 3.1 and 3.2 were addressed by these corrective actions?

0 | 5

NOTE: Complete the attached Corrective Action Form (Section D) for each condition identified, including any conditions identified as a result of this comprehensive stormwater inspection.

C. INDUSTRIAL ACTIVITY AREA SPECIFIC FINDINGS

Complete one block for each industrial activity area where pollutants may be exposed to stormwater. Copy this page for additional industrial activity areas.

In reviewing each area, you should consider:

- Industrial materials, residue, or trash that may have or could come into contact with stormwater;
- Leaks or spills from industrial equipment, drums, tanks, and other containers;
- Offsite tracking of industrial or waste materials from areas of no exposure to exposed areas; and
- Tracking or blowing of raw, final, or waste materials from areas of no exposure to exposed areas.

INDUSTRIAL ACTIVITY AREA 1:

1. Brief Description:

Concrete channel at north side of the limestone dome needs to be cleaned.

2. Are any control measures in need of maintenance or repair? ☒ YES ☐ NO
3. Have any control measures failed and require replacement? ☐ YES ☒ NO
4. Are any additional/revised control measures necessary in this area? ☐ YES ☒ NO

If YES to any of these three questions, provide a description of the problem: (Any necessary corrective actions should be described on the attached Corrective Action Form)

Increase good housekeeping practices requiring to maintain the channel free from obstruction.

INDUSTRIAL ACTIVITY AREA 2:

1. Brief Description:

Diesel unloading concrete low wall secondary containment needs repair at one of its corners.

2. Are any control measures in need of maintenance or repair? ☒ YES ☐ NO
3. Have any control measures failed and require replacement? ☐ YES ☒ NO
4. Are any additional/revised c necessary in this area? ☐ YES ☒ NO

If YES to any of these three questions, provide a description of the problem: (Any necessary corrective actions should be described on the attached Corrective Action Form)

Repair low wall secondary containment.

INDUSTRIAL ACTIVITY AREA 3:

Brief Description:

Super silt fence along the inactive coal pile need to be replaced at few areas.

2. Are any control measures in need of maintenance or repair? ☒ YES ☐ NO
3. Have any control measures failed and require replacement? ☒ YES ☐ NO
4. Are any additional/revised BMPs necessary in this area? ☐ YES ☒ NO

If YES to any of these three questions, provide a description of the problem: (Any necessary corrective actions should be described on the attached Corrective Action Form)

Established regular inspection and replace silt fence as required.

NOTE: Copy this page and attach additional pages as necessary

INDUSTRIAL ACTIVITY AREA 4:

1. Brief Description:

Sample point 002 needs to be modified to comply with the requirements of the MSGP.

2. Are any control measures in need of maintenance or repair? ☒ YES ☐ NO
3. Have any control measures failed and require replacement? ☒ YES ☐ NO
4. Are any additional/revised BMPs necessary in this area? ☐ YES ☒ NO

If YES to any of these three questions, provide a description of the problem: (Any necessary corrective actions should be described on the attached Corrective Action Form)

The tip of the strainer cannot touch the floor and also the v-notch need to be raised.

INDUSTRIAL ACTIVITY AREA 5:

1. Brief Description:

Sediment tracking may discharge at outfall 002 when trucks gain access through gate #3. Additional BMP is required.

2. Are any control measures in need of maintenance or repair? ☒ YES ☐ NO
3. Have any control measures failed and require replacement? ☒ YES ☐ NO
4. Are any additional/revised BMPs necessary in this area? ☒ YES ☐ NO

If YES to any of these three questions, provide a description of the problem: (Any necessary corrective actions should be described on the attached Corrective Action Form)

Proper selection and installation of BMP is required to prevent pollutants be discharged.

INDUSTRIAL ACTIVITY AREA ____:

1. Brief Description:

2. Are any control measures in need of maintenance or repair? ☐ YES ☐ NO
3. Have any control measures failed and require replacement? ☐ YES ☐ NO
4. Are any additional/revised BMPs necessary in this area? ☐ YES ☐ NO

If YES to any of these three questions, provide a description of the problem: (Any necessary corrective actions should be described on the attached Corrective Action Form)

D. CORRECTIVE ACTIONS

Complete this page for each specific condition requiring a corrective action or a review determining that no corrective action is needed. Copy this page for additional corrective actions or reviews.

Include both corrective actions that have been initiated or completed since the last annual report, and future corrective actions needed to address problems identified in this comprehensive stormwater inspection. Include an update on any outstanding corrective actions that had not been completed at the time of your previous annual report.

1. Corrective Action # 01 of 05 for this reporting period.

2. Is this corrective action:

- ☐ An update on a corrective action from a previous annual report; or
☒ A new corrective action?

3. Identify the condition(s) triggering the need for this review:

- ☐ Unauthorized release or discharge
☐ Numeric effluent limitation exceedance
☐ Control measures inadequate to meet applicable water quality standards
☐ Control measures inadequate to meet non-numeric effluent limitations
☒ Control measures not properly operated or maintained
☐ Change in facility operations necessitated change in control measures
☐ Average benchmark value exceedance
☐ Other (describe): _____

4. Briefly describe the nature of the problem identified:

Sediment accumulation at process water concrete channel (north side of the limestone dome) can reduce its capacity to manage storm water runoff.

5. Date problem identified: 12 / 16 / 2014

6. How problem was identified:

- ☒ Comprehensive site inspection
☐ Quarterly visual assessment
☒ Routine facility inspection
☐ Benchmark monitoring
☐ Notification by EPA or State or local authorities
☐ Other (describe): _____

7. Description of corrective action(s) taken or to be taken to eliminate or further investigate the problem (e.g., describe modifications or repairs to control measures, analyses to be conducted, etc.) or if no modifications are needed, basis for that determination:

Housekeeping has been performed but the frequency needs to be increased.

8. Did/will this corrective action require modification of your SWPPP? ☒ YES ☐ NO

9. Date corrective action initiated: 12 / 17 / 2014

10. Date correction action completed: 12 / 30 / 2014 or expected to be completed: / /

11. If corrective action not yet completed, provide the status of corrective action at the time of the comprehensive site inspection and describe any remaining steps (including timeframes associated with each step) necessary to complete corrective action:

Corrective actions were completed. SWPPP was modified to incorporate non-structural BMP's.

D. CORRECTIVE ACTIONS

Complete this page for each specific condition requiring a corrective action or a review determining that no corrective action is needed. Copy this page for additional corrective actions or reviews.

Include both corrective actions that have been initiated or completed since the last annual report, and future corrective actions needed to address problems identified in this comprehensive stormwater inspection. Include an update on any outstanding corrective actions that had not been completed at the time of your previous annual report.

1. Corrective Action # 02 of 05 for this reporting period.

2. Is this corrective action:

- ☐ An update on a corrective action from a previous annual report; or
☒ A new corrective action?

3. Identify the condition(s) triggering the need for this review:

- ☐ Unauthorized release or discharge
☐ Numeric effluent limitation exceedance
☐ Control measures inadequate to meet applicable water quality standards
☐ Control measures inadequate to meet non-numeric effluent limitations
☒ Control measures not properly operated or maintained
☐ Change in facility operations necessitated change in control measures
☐ Average benchmark value exceedance
☐ Other (describe): _____

4. Briefly describe the nature of the problem identified:

Diesel unloading concrete low wall secondary containment needs repair at one of its corners.

5. Date problem identified: 12 / 02 / 2014

6. How problem was identified:

- ☐ Comprehensive site inspection
☐ Quarterly visual assessment
☐ Routine facility inspection
☐ Benchmark monitoring
☒ Notification by EPA or State or local authorities
☐ Other (describe): _____

7. Description of corrective action(s) taken or to be taken to eliminate or further investigate the problem (e.g., describe modifications or repairs to control measures, analyses to be conducted, etc.) or if no modifications are needed, basis for that determination:

Repair low wall of secondary containment.

8. Did/will this corrective action require modification of your SWPPP? ☐ YES ☒ NO

9. Date corrective action initiated: 12 / 03 / 2014

10. Date correction action completed: 12 / 23 / 2014 or expected to be completed: / /

11. If corrective action not yet completed, provide the status of corrective action at the time of the comprehensive site inspection and describe any remaining steps (including timeframes associated with each step) necessary to complete corrective action:

Corrective action was completed.

D. CORRECTIVE ACTIONS

Complete this page for each specific condition requiring a corrective action or a review determining that no corrective action is needed. Copy this page for additional corrective actions or reviews.

Include both corrective actions that have been initiated or completed since the last annual report, and future corrective actions needed to address problems identified in this comprehensive stormwater inspection. Include an update on any outstanding corrective actions that had not been completed at the time of your previous annual report.

1. Corrective Action # 03 of 05 for this reporting period.

2. Is this corrective action:

- ☐ An update on a corrective action from a previous annual report; or
☒ A new corrective action?

3. Identify the condition(s) triggering the need for this review:

- ☐ Unauthorized release or discharge
☐ Numeric effluent limitation exceedance
☐ Control measures inadequate to meet applicable water quality standards
☐ Control measures inadequate to meet non-numeric effluent limitations
☒ Control measures not properly operated or maintained
☐ Change in facility operations necessitated change in control measures
☐ Average benchmark value exceedance
☐ Other (describe): _____

4. Briefly describe the nature of the problem identified:

Super silt fence along the inactive coal pile needs to be replaced at few areas.

5. Date problem identified: 12 / 02 / 2014

6. How problem was identified:

- ☐ Comprehensive site inspection
☐ Quarterly visual assessment
☐ Routine facility inspection
☐ Benchmark monitoring
☒ Notification by EPA or State or local authorities
☐ Other (describe): _____

7. Description of corrective action(s) taken or to be taken to eliminate or further investigate the problem (e.g., describe modifications or repairs to control measures, analyses to be conducted, etc.) or if no modifications are needed, basis for that determination:

Silt fences must be properly installed and maintained following established guidelines.

8. Did/will this corrective action require modification of your SWPPP? ☐ YES ☒ NO

9. Date corrective action initiated: 12 / 03 / 2014

10. Date correction action completed: 01 / 21 / 2015 or expected to be completed: / /

11. If corrective action not yet completed, provide the status of corrective action at the time of the comprehensive site inspection and describe any remaining steps (including timeframes associated with each step) necessary to complete corrective action:

Corrective action was completed.

D. CORRECTIVE ACTIONS

Complete this page for each specific condition requiring a corrective action or a review determining that no corrective action is needed. Copy this page for additional corrective actions or reviews.

Include both corrective actions that have been initiated or completed since the last annual report, and future corrective actions needed to address problems identified in this comprehensive stormwater inspection. Include an update on any outstanding corrective actions that had not been completed at the time of your previous annual report.

1. Corrective Action #

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 of

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 for this reporting period.

2. Is this corrective action:

- ☐ An update on a corrective action from a previous annual report; or
☒ A new corrective action?

3. Identify the condition(s) triggering the need for this review:

- ☐ Unauthorized release or discharge
☐ Numeric effluent limitation exceedance
☐ Control measures inadequate to meet applicable water quality standards
☐ Control measures inadequate to meet non-numeric effluent limitations
☒ Control measures not properly operated or maintained
☐ Change in facility operations necessitated change in control measures
☐ Average benchmark value exceedance
☐ Other (describe): _____

4. Briefly describe the nature of the problem identified:

Sample point 002 needs to be modified to comply with the requirements of the MSGP.

5. Date problem identified:

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6. How problem was identified:

- ☐ Comprehensive site inspection
☐ Quarterly visual assessment
☐ Routine facility inspection
☐ Benchmark monitoring
☒ Notification by EPA or State or local authorities
☐ Other (describe): _____

7. Description of corrective action(s) taken or to be taken to eliminate or further investigate the problem (e.g., describe modifications or repairs to control measures, analyses to be conducted, etc.) or if no modifications are needed, basis for that determination:

The tip of the strainer cannot touch the floor and also the v-notch needs to be raised.

8. Did/will this corrective action require modification of your SWPPP? ☐ YES ☒ NO

9. Date corrective action initiated:

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10. Date correction action completed:

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 or expected to be completed:

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11. If corrective action not yet completed, provide the status of corrective action at the time of the comprehensive site inspection and describe any remaining steps (including timeframes associated with each step) necessary to complete corrective action:

Corrective action was completed.

D. CORRECTIVE ACTIONS

Complete this page for each specific condition requiring a corrective action or a review determining that no corrective action is needed. Copy this page for additional corrective actions or reviews.

Include both corrective actions that have been initiated or completed since the last annual report, and future corrective actions needed to address problems identified in this comprehensive stormwater inspection. Include an update on any outstanding corrective actions that had not been completed at the time of your previous annual report.

1. Corrective Action # 05 of 05 for this reporting period.

2. Is this corrective action:

- ☐ An update on a corrective action from a previous annual report; or
☒ A new corrective action?

3. Identify the condition(s) triggering the need for this review:

- ☐ Unauthorized release or discharge
☐ Numeric effluent limitation exceedance
☐ Control measures inadequate to meet applicable water quality standards
☒ Control measures inadequate to meet non-numeric effluent limitations
☐ Control measures not properly operated or maintained
☐ Change in facility operations necessitated change in control measures
☒ Average benchmark value exceedance
☒ Other (describe): Control measures not adequate

4. Briefly describe the nature of the problem identified:

Sediment tracking may discharge at outfall 002 when trucks gain access through gate #3. Additional BMP is required.

5. Date problem identified: 12 / 02 / 2014

6. How problem was identified:

- ☒ Comprehensive site inspection
☐ Quarterly visual assessment
☐ Routine facility inspection
☐ Benchmark monitoring
☒ Notification by EPA or State or local authorities
☐ Other (describe): _____

7. Description of corrective action(s) taken or to be taken to eliminate or further investigate the problem (e.g., describe modifications or repairs to control measures, analyses to be conducted, etc.) or if no modifications are needed, basis for that determination:

Proper selection and installation of BMP is required to prevent pollutants be discharged.

8. Did/will this corrective action require modification of your SWPPP? ☒ YES ☐ NO

9. Date corrective action initiated: 12 / 03 / 2014

10. Date correction action completed: / / or expected to be completed:

02 / 28 / 2015

11. If corrective action not yet completed, provide the status of corrective action at the time of the comprehensive site inspection and describe any remaining steps (including timeframes associated with each step) necessary to complete corrective action:

A possible BMP solution has been identified. Waiting for parts arrival and installation.

P R R 0 5 B L 6 5

E. ANNUAL REPORT CERTIFICATION**1. Compliance Certification**

Do you certify that your annual inspection has met the requirements of Part 4.3 of the permit, and that, based upon the results of this inspection, to the best of your knowledge, you are in compliance with the permit? ☒ YES ☐ NO

If NO, summarize why you are not in compliance with the permit:

2. Annual Report Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Authorized Representative
Printed Name:

M A N U E L M A T A

Title:

P L A N T M A N A G E R

Signature: _____

Date Signed: January 23, 2015

Appendix 2

**Administrative Compliance Order
AES-PR Coal Fired Power Plant
Docket Number CWA-02-2012-3100**

**Routine Facility Inspections
October - December 2014**

Worksheet No. 5

Record corrective actions initiated, date completed, and note the person that completed the work in the Corrective Action Log.				
	Structural Control Measure	Control Measure is Operating Effectively?	If No, In Need of Maintenance, Repair, or Replacement?	Corrective Action Needed and Notes (identify needed maintenance and repairs, or any failed control measures that need replacement)
1	Water Treatment Berm	✓Yes <input type="checkbox"/> No	<input type="checkbox"/> Maintenance <input type="checkbox"/> Repair <input type="checkbox"/> Replacement	
2	Coal Pile Run-off Sediment trap	✓Yes <input type="checkbox"/> No	<input type="checkbox"/> Maintenance <input type="checkbox"/> Repair <input type="checkbox"/> Replacement	The coal pile run off pond and the sediment are in the cleaning process. This activity will be finished by the end of this month.
3	Limestone Dome	✓Yes <input type="checkbox"/> No	✓ Maintenance <input type="checkbox"/> Repair <input type="checkbox"/> Replacement	Channel at north side in front of the limestone dome need to be cleaned.
4	Agremax Pile Gabion Wall	✓Yes <input type="checkbox"/> No	<input type="checkbox"/> Maintenance <input type="checkbox"/> Repair <input type="checkbox"/> Replacement	
5	Oil Separator Heavy Equipment Shop	✓Yes <input type="checkbox"/> No	<input type="checkbox"/> Maintenance <input type="checkbox"/> Repair <input type="checkbox"/> Replacement	
6	Fuel Oil Secondary Containment	<input type="checkbox"/> Yes ✓No	✓ Maintenance ✓ Repair <input type="checkbox"/> Replacement	Fuel Oil tanks secondary containment need to be cleaned. Also the low wall at the unloading area needs repair.
7	Oil Drum Storage Shed	✓Yes <input type="checkbox"/> No	<input type="checkbox"/> Maintenance <input type="checkbox"/> Repair <input type="checkbox"/> Replacement	
8	Soda Ash Secondary Containment	✓Yes <input type="checkbox"/> No	<input type="checkbox"/> Maintenance <input type="checkbox"/> Repair <input type="checkbox"/> Replacement	
9	Acid/Caustic Secondary Containment	✓Yes <input type="checkbox"/> No	<input type="checkbox"/> Maintenance <input type="checkbox"/> Repair <input type="checkbox"/> Replacement	

AES Puerto Rico, LP
Storm Water Pollution Prevention Plan

	Structural Control Measure	Control Measure is Operating Effectively?	If No, In Need of Maintenance, Repair, or Replacement?	Corrective Action Needed and Notes (identify needed maintenance and repairs, or any failed control measures that need replacement)
10	Marine Dock Wash Holding Tank	✓Yes <input type="checkbox"/> No	<input type="checkbox"/> Maintenance <input type="checkbox"/> Repair <input type="checkbox"/> Replacement	
11	Wheel Washer	✓Yes <input type="checkbox"/> No	<input type="checkbox"/> Maintenance <input type="checkbox"/> Repair <input type="checkbox"/> Replacement	
12	Roll up cover for waste dumpsters	✓Yes <input type="checkbox"/> No	<input type="checkbox"/> Maintenance <input type="checkbox"/> Repair <input type="checkbox"/> Replacement	
13	Reinforced silt fence	<input type="checkbox"/> Yes ✓No	✓Maintenance <input type="checkbox"/> Repair <input type="checkbox"/> Replacement	The reinforced silt fence is under replacement. This work will be finish by the end of month.
14	Catch basin inlet protection	✓Yes <input type="checkbox"/> No	<input type="checkbox"/> Maintenance <input type="checkbox"/> Repair <input type="checkbox"/> Replacement	
15	Cooling tower containment structure	✓Yes <input type="checkbox"/> No	<input type="checkbox"/> Maintenance <input type="checkbox"/> Repair <input type="checkbox"/> Replacement	
16	Unpaved road stabilization	✓Yes <input type="checkbox"/> No	<input type="checkbox"/> Maintenance <input type="checkbox"/> Repair <input type="checkbox"/> Replacement	Additional gravel was applied to unpaved roads.
17	CDS/ESP containment area	✓Yes <input type="checkbox"/> No	<input type="checkbox"/> Maintenance <input type="checkbox"/> Repair <input type="checkbox"/> Replacement	
18	Dust suppression system for Agremax	✓Yes <input type="checkbox"/> No	<input type="checkbox"/> Maintenance <input type="checkbox"/> Repair <input type="checkbox"/> Replacement	Dust suppression project was finished and in operation.
19	Dust suppression system for truck unloading area	✓Yes <input type="checkbox"/> No	<input type="checkbox"/> Maintenance <input type="checkbox"/> Repair <input type="checkbox"/> Replacement	
20	Limestone silo secondary containment	✓Yes <input type="checkbox"/> No	<input type="checkbox"/> Maintenance <input type="checkbox"/> Repair <input type="checkbox"/> Replacement	
21	Coal transfer dust suppression system	✓Yes <input type="checkbox"/> No	<input type="checkbox"/> Maintenance <input type="checkbox"/> Repair <input type="checkbox"/> Replacement	
22	Coal conveyor cover	✓Yes <input type="checkbox"/> No	<input type="checkbox"/> Maintenance <input type="checkbox"/> Repair <input type="checkbox"/> Replacement	A section of the coal conveyor system is under repair. Scaffold material was placed above the conveyor to avoid storm water exposure until finished the repairs.
23	Water Truck	✓Yes <input type="checkbox"/> No	<input type="checkbox"/> Maintenance <input type="checkbox"/> Repair <input type="checkbox"/> Replacement	
24	Mechanical sweeper	✓Yes <input type="checkbox"/> No	<input type="checkbox"/> Maintenance <input type="checkbox"/> Repair <input type="checkbox"/> Replacement	
25		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Maintenance <input type="checkbox"/> Repair <input type="checkbox"/> Replacement	
26		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Maintenance <input type="checkbox"/> Repair <input type="checkbox"/> Replacement	
27		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Maintenance <input type="checkbox"/> Repair <input type="checkbox"/> Replacement	

AES Puerto Rico, LP
Storm Water Pollution Prevention Plan

Areas of Industrial Materials or Activities exposed to stormwater

Below are some general areas that should be assessed during routine inspections. Customize this list as needed for the specific types of industrial materials or activities at your facility.

	Area/Activity	Inspected?	Controls Adequate (appropriate, effective, and operating)?	Corrective Action Needed and Notes
1	Material loading/unloading and storage areas (Agremax, Limestone, Coal Storages)	✓Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	✓Yes <input type="checkbox"/> No	
2	Heavy Equipment operations and maintenance areas	✓Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	✓Yes <input type="checkbox"/> No	
3	Fueling areas (Heavy Equipment Fueling and Storage Tank Unloading)	✓Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	✓Yes <input type="checkbox"/> No	
4	Outdoor vehicle and equipment washing areas	✓Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	✓Yes <input type="checkbox"/> No	
5	Waste handling and disposal areas	✓Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	✓Yes <input type="checkbox"/> No	
6	Erodible (Coal Pile, Agremax Pile)	✓Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	✓Yes <input type="checkbox"/> No	
7	Non-stormwater/ illicit connections	✓Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	✓Yes <input type="checkbox"/> No	
8	Dust generation and vehicle tracking	✓Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	✓Yes <input type="checkbox"/> No	
9	Water Treatment Area	✓Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	✓Yes <input type="checkbox"/> No	
10	Power Block Area	✓Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	✓Yes <input type="checkbox"/> No	
11	Administration Building Area	✓Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	✓Yes <input type="checkbox"/> No	
12	2 Million and 18 Million Pond Area	✓Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	✓Yes <input type="checkbox"/> No	
13	Marine Dock Area	✓Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	✓Yes <input type="checkbox"/> No	
14	Stormwater Sample Point 002	✓Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes ✓No	Additional BMP is under evaluation. Possible catch basin filter will be installed. Also the SP-002 need to be modified to be in compliance with the MSGP 2008 conditions.
15	Stormwater Sample Point 003	✓Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	✓Yes <input type="checkbox"/> No	
16	Stormwater Sample Point 001	✓Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	✓Yes <input type="checkbox"/> No	
17	Run-on storm water	✓Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	✓Yes <input type="checkbox"/> No	

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Storm Water Pollution Prevention Plan

	Area/Activity	Inspected?	Controls Adequate (appropriate, effective, and operating)?	Corrective Action Needed and Notes
	conveyance system			
18	Run-off Storm Water conveyance system	✓Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	✓Yes <input type="checkbox"/> No	All run off storm water conveyance system was cleaned.
19	Process water conveyance system	✓Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	✓Yes <input type="checkbox"/> No	All process water conveyance system was cleaned.

Non-Compliance

Describe any incidents of non-compliance observed and not described above:

AES Puerto Rico, LP
Storm Water Pollution Prevention Plan

Additional Control Measures

Describe any additional control measures needed to comply with the permit requirements:

Sample point 002 need to be modified to comply with the requirements of the MSGP 2008 condition. Work order was placed and contractor selected to complete the work.

Diesel unloading low wall need repair. Work order was placed.

Notes

Use this space for any additional notes or observations from the inspection:

CERTIFICATION STATEMENT

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."

Print name and title: Heider M. Ariz / Env. Coordinator

Signature:  Date: 12/16/14

Appendix 3

**Administrative Compliance Order
AES-PR Coal Fired Power Plant
Docket Number CWA-02-2012-3100**

**Benchmark Monitoring
December 2014**

Benchmark Monitoring Results Data Table

	Parameter	Benchmark Values	Outfall 002		Outfall 003A	Outfall 003B	Outfall 004	
			6-Feb-12	19-Mar-12			6-Feb-12	19-Mar-12
1st & 2nd Monitoring	Aluminum	0.75	247	11	NA	52.3	2.52	0.508
	Iron	1	111	2.86	NA	57.6	3.03	0.818
	Lead	0.262*	0.287	0.012	NA	0.069	0.01	<0.002
	Zinc	0.26*	1.4	0.089	NA	1.16	0.202	0.103
				10-May-12	10-May-12	10-May-12		10-May-12
3rd Monitoring	Aluminum	0.75		28	24.4	2.36		2.82
	Iron	1		25.2	29.1	2.76		3.83
	Lead	0.262*		0.041	0.026	0.003		0.007
	Zinc	0.26*		0.135	0.265	0.093		0.348
				20-Jul-12	20-Jul-12	20-Jul-12		20-Jul-12
4th Monitoring	Aluminum	0.75		54.8	8.48	10.9		1.57
	Iron	1		63.9	11.8	12.9		1.6
	Lead	0.262*		0.044	0.008	0.01		0.005
	Zinc	0.26*		0.302	0.095	0.222		0.211
								3-Dec-12
5th Monitoring	Aluminum	0.75						40.6
	Iron	1						43.63
	Lead	0.262*						0.058
	Zinc	0.26*						0.178
				1-Feb-13		1-Feb-13		1-Feb-13
6th Monitoring	Aluminum	0.75		146	N/A	34.4		4.62
	Iron	1		180	N/A	41.4		5.23
	Lead	0.262*		0.693	N/A	0.625		0.145
	Zinc	0.26*		0.588	N/A	0.431		0.231
				8-May-13	22-May-13	8-May-13		8-May-13
7th Monitoring	Aluminum	0.75		61.6	3.84	0.812		1.36
	Iron	1		14.1	4.31	0.75		1.17
	Lead	0.262*		0.108	0.008	0.002		0.003
	Zinc	0.26*		0.328	0.11	0.073		0.243
				12-Sep-13	12-Sep-13			12-Sep-13
8th Monitoring	Aluminum	0.75		151	1.62			10.2
	Iron	1		184	1.48			11.4
	Lead	0.262*		0.025	0.01			0.016
	Zinc	0.26*		0.675	0.021			0.175
				8-Oct-13	8-Oct-13			8-Oct-13
9th Monitoring	Aluminum	0.75		93.6	2.49			11.1
	Iron	1		116	2.41			13.2
	Lead	0.262*		0.008	0.004			0.007
	Zinc	0.26*		0.272	0.171			0.082
				2-Apr-14	10-Apr-14			2-Apr-14
10th Monitoring	Aluminum	0.75		1.63	0.066			7.2
	Iron	1		1.52	0.023			7.25
	Lead	0.262*		0.1	0.1			0.026
	Zinc	0.26*		0.014	0.057			0.439
				18-Jul-14	18-Jul-14			18-Jul-14
11th Monitoring	Aluminum	0.75		0.313	0.134			0.248
	Iron	1		0.102	0.119			0.134
	Lead	0.262*		0.001	0.004			0.001
	Zinc	0.26*		0.016	0.005			0.025
				19-Dec-14	16-Dec-14			19-Dec-14
12th Monitoring	Aluminum	0.75		0.364	0.124			0.24
	Iron	1		0.063	0.055			0.244
	Lead	0.262*		0.001	0.006			0.001
	Zinc	0.26*		0.026	0.001			0.016



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
WASHINGTON, DC 20460
MSGP INDUSTRIAL DISCHARGE MONITORING REPORT (MDMR)

Form Approved.
OMB No. 2040-0004

Reason(s) for Submission (Check all that apply):

- ☐ Submitting monitoring data (Fill in all Sections).
☒ Reporting no discharge for all outfalls for this monitoring period (Fill in Sections A, B, C.1, D, and F).
☐ Reporting that your site status has changed to inactive and unstaffed (Fill in Sections A, B, F and include date of status change in comment field in Section E.4).
☐ Reporting that your site status has changed to active (Fill in all Sections and include date of status change in comment field in Section E.4).
☐ Reporting that no further pollutant reductions are achievable for all outfalls and for all pollutants via Part 6.2.1.2 of the MSGP (Fill in Sections A, B and F).

A. Permit Tracking Number: **PRR05BL65**

Note: Read instructions before completing this Form.

B. Facility Information

1. Facility Name: **AES PUERTO RICO**

2. Facility Location:

a. Street: **PR-03 KM 142.0 BO. JOBOS**

b. City: **GUAYAMA**

c. State: **PR** d. Zip Code: **00785**

3. Additional Facility Information (Optional):

Contact Name: **MANUEL MATA**

Email: **manuel.mata@aes.com**

Phone: **787-866-8117** Ext. **2233**

4. MDMR Preparer (Complete if MDMR was prepared by someone other than the person signing the certification in Section F)

Prepared by: **HECTOR M AVILA**

Organization: **AES PUERTO RICO**

Email: **hector.avila@aes.com**

Phone: **787-866-8117** Ext. **2266**

C. Discharge Information

1. Identify monitoring period:

☒ Check here if proposing alternative monitoring periods due to irregular stormwater runoff. Identify alternative monitoring schedule and indicate for which alternative monitoring period you are reporting monitoring data:

☐ Quarter 1 (April 1 – June 30) ☒ Quarter 1: From **01 / 01** To **03 / 31**

☐ Quarter 2 (July 1 – September 30) ☐ Quarter 2: From **04 / 01** To **06 / 30**

☐ Quarter 3 (October 1 – December 31) ☐ Quarter 3: From **07 / 01** To **09 / 30**

☐ Quarter 4 (January 1 – March 31) ☐ Quarter 4: From **10 / 01** To **12 / 31**

2. Are you required to monitor for cadmium, copper, chromium, lead, nickel, silver, or zinc? ☒ Yes (Complete line item 2.a.) ☐ No (Skip to Section D)

2.a. What is the hardness level of the receiving water? **6800** mg/L

D. Outfall Information

1. How many outfall(s) are identified in your SWPPP? **03** List name of outfall(s) required to be monitored in table below.

2. Do any of your outfalls discharge substantially identical effluents? ☐ YES ☒ NO

2.a. If yes, for each monitored outfall, indicate outfall names that are substantially identical in table below.

3.A. Monitored Outfall Name*	3.B. Substantially Identical Outfalls [List name(s) of outfall(s) substantially identical to outfall in 3.A. (if applicable)]	3.C. No Discharge?
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

*Reference attachment if additional space needed to complete the table.

Instructions for Completing the MSGP Industrial Discharge Monitoring Report (MDMR)

Who Must Submit A Discharge Monitoring Report to EPA?

Facilities covered under the Multi-Sector General Permit (MSGP or permit) that are required to monitor pursuant to Parts 6.2, 6.3, and 8 of the permit must submit the MSGP Discharge Monitoring Report (MDMR) consistent with the reporting requirements specified in Part 7.1 of the permit.

Where to File the MDMR Form

Monitoring data collected pursuant to Parts 6.2, 6.3, and 8 of the permit must be submitted electronically via EPA's Electronic Notice of Intent System (eNOI), which can be found at www.epa.gov/npdess/enoi. Filing electronically will allow permittees to easily submit the results of monitoring data to EPA. If you cannot access eNOI, monitoring results must be reported on the paper MDMR form and sent to one of the following addresses:

Via U.S. mail:

U.S. Environmental Protection Agency
Office of Water, Water Permits Division
Mail Code 4203M, ATTN: MSGP Reports
1200 Pennsylvania Avenue, NW
Washington, D.C. 20460

Via Overnight/Express Delivery:

U.S. Environmental Protection Agency
Office of Water, Water Permits Division
Room 7420, ATTN: MSGP Reports
1201 Constitution Avenue, NW
Washington, D.C. 20004
Phone number: 202-564-9545

Completing the MDMR Form

To complete this form, type or print in uppercase letters in the appropriate areas only. Be sure that you complete all applicable questions. Photocopy your MDMR form for your records before you send the completed original form to the appropriate address above. Use ink when you sign and mail the original document – EPA will not accept photocopies. You may also use this paper form as a checklist for the information you will need when submitting a MDMR electronically via EPA's eNOI system.

Reasons for Submission

Indicate your reason(s) for submitting this MDMR by checking all boxes that apply. The reasons for submission are defined as follows:

- *Submitting monitoring data:* For each storm sampled, submit one MDMR form with data for all outfalls sampled. Select this reason even if you only have monitoring data for some of your outfalls (i.e., some outfalls did not discharge). If you select this reason you are required to complete all Sections of the form.
- *Reporting no discharge for all outfalls for this monitoring period:* Indicates that there were no discharges from all outfalls during this monitoring period. If you select this reason you are only required to complete Sections A, B, C.1, D, and F.
- *Reporting that your site status has changed to inactive and unstaffed:* Indicates that your facility is currently inactive and unstaffed (See Part 6.2.1.3 of the permit for more information). If you select this reason you are only required to complete Sections A, B, and F and include date of status change in the comment field in Section E.4.
- *Reporting that you site status has changed from inactive to active:* Indicates that your facility is currently active (See Part 6.2.1.3 of the permit for more information). If you select this reason you are required to complete all Sections of the form and include date of status change in the comment field in Section E.4.
- *Reporting that no further reductions are achievable for all outfalls and for all pollutants via Part 6.2.1.2 of the permit:* Indicates that your facility has determined that no further pollutant reductions are technologically and economically practicable in light of best industry practice to meet the technology-based effluent limits or are necessary to meet the water-quality-based effluent limitations in Parts 2 of the permit (See Part 6.2.1.2 of the permit for more information). If you select this reason you are required to complete Sections A, B and F. However, if you can make this finding for some outfalls and pollutants, but not for others, you cannot select this reason; you will instead be able to identify which outfalls and which pollutants you can make this finding for in Section E.

Section A. Permit Tracking Number

Enter the National Pollutant Discharge Elimination System (NPDES) tracking number assigned by EPA's Stormwater Notice Processing Center to the facility. If you do not know the tracking number, you can find the tracking number assigned to your facility on EPA's Notice of Intent (NOI) Search website (www.epa.gov/npdess/noisearch).

Section B. Facility Information

1. Enter the facility's official or legal name. Unless the name of your facility has changed, please use the same name provided on your NOI. You can use EPA's NOI Search website (www.epa.gov/npdess/noisearch) to view your NOI.
- 2.a-d. Enter the street address, including city, state, and zip code of the actual physical location of the facility. Do not use a P.O. Box.
3. (Optional) Identify the name, telephone number, and email address of the person who will serve as a contact for EPA on issues related to monitoring at your facility. This person should be able to answer questions related to stormwater discharges and monitoring or have immediate access to individuals with that knowledge. This person does not have to be the facility operator, but should have intimate knowledge of monitoring activities at the facility.
4. If the form was prepared by someone other than the person who is signing the certification statement in Section F (for example, if the MDMR was prepared by a member of the facility's stormwater pollution prevention team or a consultant for the certifier's signature), include the name, organization, phone number and email address of the MDMR preparer.

Section C. Discharge Information

1. Indicate the appropriate monitoring period (Quarter 1, 2, 3, or 4) covered by the MDMR. "Alternative" monitoring periods can apply to facilities located in arid and semi-arid climates, or in areas subject to snow or prolonged freezing. To use alternative monitoring periods, you must provide a revised monitoring schedule here in the first monitoring report submitted and indicate for which alternative monitoring period you are reporting monitoring data. If using alternative monitoring periods, identify the first day of the monitoring period through the last day of the monitoring period for each of the four periods. The dates should be displayed as month (Mo) / day (Day). See Parts 6.1.6 and 6.1.7 of the permit for more information.
2. If you are submitting benchmark monitoring data, identify if your facility is required to collect benchmark samples for one or more hardness-dependent metals (i.e., cadmium, copper, lead, nickel, silver, and zinc). If you select "yes" to this question you must also complete Question 2.a. and if you select "no" to this question you may skip to Section D.
- 2.a. If you selected "yes" for Question 2 under Section C, then you are required to submit to EPA with your first benchmark report a hardness level, established consistent with the procedures in Appendix J of the permit, which is representative of your receiving water. If your outfalls discharge to more than one receiving water, as reported in your NOI form, you should report hardness for the receiving water with the lowest hardness values. Hardness values must be reported in milligrams per liter (mg/L).

Section D. Outfall Information

1. Enter the total number of outfalls identified in your stormwater pollution prevention plan (SWPPP). Outfalls are locations where stormwater exits the facility, including pipes, ditches, swales, and other structures used to remove stormwater from the facility.
2. Indicate if your facility has two or more outfalls that you believe discharge substantially identical effluents (i.e., stormwater), based on the similarities of the general industrial activities and control measures, exposed materials that may significantly contribute pollutants to stormwater, and runoff coefficients of their drainage areas. See Parts 5.1.5.2 and 6.1.1 of the permit for more information on substantially identical outfalls.
- 2.a. If you selected "yes" for Question 2 under Section D, then you must list the outfall name(s) in Column 3.B. that you expect to be substantially identical to the corresponding outfall in Column 3.A.
- 3.A. *Monitored Outfall Name:* List name(s) of outfall(s) you are required to monitor in Column 3.A.
- 3.B. *Substantially Identical Outfalls:* List name(s) of outfall(s) substantially identical to "Monitored Outfall" in Column 3.A. (if applicable)].
- 3.C. *No Discharge:* Check box if you are reporting "No Discharge" for the monitored outfall for the reporting period identified in Section C.1.

Example:

3.A Monitored Outfall Name	3.B. Substantially Identical Outfall	3.C. No Discharge
Outfall A	Outfall B; Outfall C	<input type="checkbox"/>
Outfall D		<input checked="" type="checkbox"/>

Reference attachment if additional space is needed to complete the Table Section D.

Section E. Monitoring Information

1. Enter the NPDES tracking number assigned by EPA's Stormwater Notice Processing Center to the facility reported in Section A.
2. For the reported monitoring event indicate whether the discharge was from a rainfall or snowmelt event. If you select "rainfall" then indicate the duration (in hours) of the rainfall event, rainfall total (in inches) for that rainfall event, and time (in days) since the previous measurable storm event in line items 2.a-c. For both rainfall and snowmelt monitoring, you must identify the date of collection for the monitoring event in column 3.g. of the table. If the discharge occurs during a period of both rainfall and snowmelt, check both the rainfall and snowmelt boxes and report the appropriate rainfall information in item 2.a-c. To report multiple monitoring events in the same reporting period, copy Page 2 of this Form and enter each monitoring event separately with data for all outfalls sampled.

For each pollutant monitored at an outfall, you must complete one row in the Table as follows:

- 3.a. **Outfall Name:** Provide the outfall name for which you monitored (e.g., Outfall 1, Outfall 2, Outfall 3).
- 3.b. **Monitoring Type:** Provide the type of monitoring using the specified codes, in parentheses, below:
 - (QBM) – Quarterly benchmark monitoring
 - (ELG) – Annual effluent limitations guidelines monitoring;
 - (S/T) – State- or Tribal-specific monitoring;
 - (I) – Impaired waters monitoring; or
 - (O) – Other monitoring as required by EPA.
- 3.c. **Parameter(s):** Enter each "Parameter" (or "pollutant") monitored. For QBM and ELG monitoring, use the same parameter name as in Part 8 of the permit.
- 3.d. **Quality or Concentration:** Enter sample measurement value for each parameter analyzed and required to be reported. Enter "ND" (i.e., not detected) for any sample results below the method detection limit or "BQL" (i.e., below quantitation limit) for sample results above the detection limit but below the quantitation limit.
- 3.e. **Units:** Enter the units for sample measurement values (i.e., "mg/L" for milligrams per liter) for each parameter analyzed and required to be reported. For monitoring results reported as ND or BQL this space will be left blank and the units will be reported in Column 3.f.
- 3.f. **Results Description:** This section must be completed for any monitoring results reported as ND or BQL in the "Quality or Concentration" column. For ND, report the laboratory detection level and units in this column. For BQL, report the laboratory quantitation limit and units in this column.
- 3.g. **Collection Date:** Identify the sampling date for each parameter monitoring result reported on this form.
- 3.h. **Exceedance due to natural background pollutant levels:** Check box if following the first 4 quarters of benchmark monitoring (or sooner if the exceedance is triggered by less than 4 quarters of data) you have determined that the exceedance of the benchmark is attributable solely to the presence of that pollutant in the natural background for that outfall and any substantially identical outfalls. See Part 6.2.4.2 of the permit for more information. Attach supporting rationale for your determination to the submitted MDMR and reference attachment in Section E.4.
- 3.i. **No further pollutant reductions achievable:** Check box if after collection of 4 quarterly samples (or sooner if the exceedance is triggered by less than 4 quarters of data), the average of the 4 monitoring values for any parameter exceeds the benchmark and you have made the determination that no further pollutant reductions are technologically available and economically practicable and achievable in light of best industry practice to meet the technology-based

effluent limits or are necessary to meet the water-quality-based effluent limitations in Parts 2 of the permit (See Part 6.2.1. of the permit for more information) for that outfall and any substantially identical outfalls. Attach supporting rationale for your determination to the submitted MDMR and reference attachment in Section E.4.

4. Where violations of the permit requirements are reported, include a brief explanation to describe the cause and corrective actions taken, and reference each violation by date. Also, this section should include any additional comments such as are required when changing site status from inactive and unstaffed to active or vice versa. Attach additional pages if you need more space.

Attach additional copies of Section E as necessary to address all outfalls and parameters.

Section F. Certification

Enter "Name/Title of Principal Executive Officer or Authorized Agent" with "Signature of Principal Executive Officer or Authorized Agent," "Date" form was signed and email of the "Principal Executive Officer or Authorized Agent." If you submit multiple pages of Section E monitoring data, each page must be appropriately signed and certified as described below.

Certification statement and signature (see Section B.11 in Appendix B of the permit for more information). Federal statutes provide for severe penalties for submitting false information on this reporting form. Federal regulations require this form to be signed by one of the following individuals, or a duly authorized representative of that person, as follows:

For a corporation: by a responsible corporate officer, which means:

- (i) president, secretary, treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy or decision making functions for the corporation, or
- (ii) the manager of one or more manufacturing, production, or operating facilities, provided the manager is authorized to make management decisions which govern the operation of the regulated facility including having the explicit or implicit duty of making major capital investment recommendations, and initiating and directing other comprehensive measures to assure long term environmental compliance with environmental laws and regulations; the manager can ensure that the necessary systems are established or actions taken to gather complete and accurate information for permit application requirements; and where authority to sign documents has been assigned or delegated to the manager in accordance with corporate procedures;

For a partnership or sole proprietorship: by a general partner or the proprietor; or
For a municipal, State, Federal, or other public facility: by either a principal executive or ranking elected official.

Paperwork Reduction Act Notice

Public reporting burden for this certification is estimated to average 7.25 hours per response plus an additional 2 hours for respondents required to gather hardness data, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding the burden estimate, any other aspect of the collection of information, or suggestions for improving this form, including any suggestions which may increase or reduce this burden to: Director, Office of Environmental Information Services, Collection Services Division (2823), USEPA, 1200 Pennsylvania Avenue, NW, Washington, DC 20460. Include the OMB control number of this form on any correspondence. Do not send the completed MDMR form to this address.



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
WASHINGTON, DC 20460
MSGP INDUSTRIAL DISCHARGE MONITORING REPORT (MDMR)

Form Approved.
OMB No. 2040-0004

Reason(s) for Submission (Check all that apply):

- ☒ Submitting monitoring data (Fill in all Sections).
☐ Reporting no discharge for all outfalls for this monitoring period (Fill in Sections A, B, C 1, D, and F).
☐ Reporting that your site status has changed to inactive and unstaffed (Fill in Sections A, B, F and include date of status change in comment field in Section E.4).
☐ Reporting that your site status has changed to active (Fill in all Sections and include date of status change in comment field in Section E.4).
☐ Reporting that no further pollutant reductions are achievable for all outfalls and for all pollutants via Part 6.2.1.2 of the MSGP (Fill in Sections A, B and F).

A. Permit Tracking Number: **PRR05BL65**

Note: Read instructions before completing this Form.

B. Facility Information

1. Facility Name: **AES PUERTO RICO**

2. Facility Location:

a. Street: **PR-03 KM 142.0 BO. JOBOS**

b. City: **GUAYAMA**

c. State: **PR** d. Zip Code: **00785**

3. Additional Facility Information (Optional):

Contact Name: **MANUEL MATA**

Email: **manuel.mata@aes.com**

Phone: **787-866-8117** Ext. **2219**

4. MDMR Preparer (Complete if MDMR was prepared by someone other than the person signing the certification in Section F)

Prepared by: **HECTOR M AVILA**

Organization: **AES PUERTO RICO**

Email: **hector.avilla@aes.com**

Phone: **787-866-8117** Ext. **2266**

C. Discharge Information

1. Identify monitoring period:

☒ Check here if proposing alternative monitoring periods due to irregular stormwater runoff. Identify alternative monitoring schedule and indicate for which alternative monitoring period you are reporting monitoring data

☐ Quarter 1 (April 1 – June 30)

☐ Quarter 1: From **01** / **01** To **03** / **01**

☐ Quarter 2 (July 1 – September 30)

☒ Quarter 2: From **04** / **01** To **06** / **30**

☐ Quarter 3 (October 1 – December 31)

☐ Quarter 3: From **01** / **01** To **03** / **01**

☐ Quarter 4 (January 1 – March 31)

☐ Quarter 4: From **01** / **01** To **03** / **01**

2. Are you required to monitor for cadmium, copper, chromium, lead, nickel, silver, or zinc? ☒ Yes (Complete item 2 a) ☐ No (Skip to Section D)

2.a. What is the hardness level of the receiving water? **6800** mg/L

D. Outfall Information

1. How many outfall(s) are identified in your SWPPP? **03** List name of outfall(s) required to be monitored in table below

2. Do any of your outfalls discharge substantially identical effluents? ☐ YES ☒ NO

2.a. If yes, for each monitored outfall, indicate outfall names that are substantially identical in table below

3.A. Monitored Outfall Name*	3.B. Substantially Identical Outfalls (List name(s) of outfall(s) substantially identical to outfall in 3.A. (if applicable))	3.C. No Discharge?
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

*Reference attachment if additional space needed to complete the table



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
WASHINGTON, DC 20460
MSGP INDUSTRIAL DISCHARGE MONITORING REPORT (MDMR)

Form Approved. OMB No. 2040-0004

E. Monitoring Information

Note: Make additional copies of this form as necessary.

1. Permit Tracking Number: **P|R|R|0|5|B|L|6|5|**

2. Nature of Discharge: ☒ Rainfall (Complete line items 2.a., 2.b., & 2.c.) ☐ Snowmelt

2.a. Duration of the rainfall event (hours): **0|1|** 2.b. Rainfall amount (inches): **0|0|** 2.c. Time since previous measurable storm event (days): **0|0|6|**

3.a. Outfall Name	3.b. Monitoring Type (QBM, ELG, S/T, I, O)*	3.c. Parameter	3.d. Quality or Concentration	3.e. Units	3.f. Results Description	3.g. Collection Date	3.h. Exceedance due to natural background pollutant levels	3.i. No further pollutant reductions achievable?
002	QMB	Aluminum	1.63	mg/L		04/02/14	<input type="checkbox"/>	<input type="checkbox"/>
002	QMB	Iron	1.52	mg/L		04/02/14	<input type="checkbox"/>	<input type="checkbox"/>
002	QMB	Lead	0.010	mg/L		04/02/14	<input type="checkbox"/>	<input type="checkbox"/>
002	QMB	Zinc	0.014	mg/L		04/02/14	<input type="checkbox"/>	<input type="checkbox"/>
004	QMB	Aluminum	7.20	mg/L		04/02/14	<input type="checkbox"/>	<input type="checkbox"/>
004	QMB	Iron	7.25	mg/L		04/02/14	<input type="checkbox"/>	<input type="checkbox"/>
004	QMB	Lead	0.026	mg/L		04/02/14	<input type="checkbox"/>	<input type="checkbox"/>
004	QMB	Zinc	0.439	mg/L		04/02/14	<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>

* (QBM) - Quarterly benchmark monitoring; (ELG) - Annual effluent limitations guidelines monitoring; (S/T) - State- or Tribal-specific monitoring; (I) - Impaired waters monitoring; (O) - Other monitoring as required by EPA

4. Comment and/or Explanation of Any Violations (Reference all attachments here)

F. Certification

Hector M. Avila

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Typed or Printed Name/Title of Principal Executive Officer or Authorized Agent

Signature of Principal Executive Officer or Authorized Agent

Date

Email of Principal Executive Officer or Authorized Agent: **h|e|c|t|o|r|.a|v|i|l|a@|e|s|.c|o|m|**

Instructions for Completing the MSGP Industrial Discharge Monitoring Report (MDMR)

Who Must Submit A Discharge Monitoring Report to EPA?

Facilities covered under the Multi-Sector General Permit (MSGP or permit) that are required to monitor pursuant to Parts 6.2, 6.3, and 8 of the permit must submit the MSGP Discharge Monitoring Report (MDMR) consistent with the reporting requirements specified in Part 7.1 of the permit.

Where to File the MDMR Form

Monitoring data collected pursuant to Parts 6.2, 6.3, and 8 of the permit must be submitted electronically via EPA's Electronic Notice of Intent System (eNOI), which can be found at www.epa.gov/npdes/enoi. Filing electronically will allow permittees to easily submit the results of monitoring data to EPA. If you cannot access eNOI, monitoring results must be reported on the paper MDMR form and sent to one of the following addresses:

Via U.S. mail

U.S. Environmental Protection Agency
Office of Water, Water Permits Division
Mail Code 4203M, ATTN: MSGP Reports
1200 Pennsylvania Avenue, NW
Washington, D.C. 20460

Via Overnight/Express Delivery

U.S. Environmental Protection Agency
Office of Water, Water Permits Division
Room 7420, ATTN: MSGP Reports
1201 Constitution Avenue, NW
Washington, D.C. 20004
Phone number: 202-564-9545

Completing the MDMR Form

To complete this form, type or print in uppercase letters in the appropriate areas only. Be sure that you complete all applicable questions. Photocopy your MDMR form for your records before you send the completed original form to the appropriate address above. Use ink when you sign and mail the original document - EPA will not accept photocopies. You may also use this paper form as a checklist for the information you will need when submitting a MDMR electronically via EPA's eNOI system.

Reasons for Submission

Indicate your reason(s) for submitting this MDMR by checking all boxes that apply. The reasons for submission are defined as follows:

- **Submitting monitoring data:** For each storm sampled, submit one MDMR form with data for all outfalls sampled. Select this reason even if you only have monitoring data for some of your outfalls (i.e., some outfalls did not discharge). If you select this reason you are required to complete all Sections of the form.
- **Reporting no discharge for all outfalls for this monitoring period:** Indicates that there were no discharges from all outfalls during this monitoring period. If you select this reason you are only required to complete Sections A, B, C 1, D, and F.
- **Reporting that your site status has changed to inactive and unstaffed:** Indicates that your facility is currently inactive and unstaffed (See Part 6.2.1.3 of the permit for more information). If you select this reason you are only required to complete Sections A, B, and F and include date of status change in the comment field in Section E.4.
- **Reporting that you site status has changed from inactive to active:** Indicates that your facility is currently active (See Part 6.2.1.3 of the permit for more information). If you select this reason you are required to complete all Sections of the form and include date of status change in the comment field in Section E.4.
- **Reporting that no further reductions are achievable for all outfalls and for all pollutants via Part 6.2.1.2 of the permit:** Indicates that your facility has determined that no further pollutant reductions are technologically and economically practicable in light of best industry practice to meet the technology-based effluent limits or are necessary to meet the water-quality-based effluent limitations in Parts 2 of the permit (See Part 6.2.1.2 of the permit for more information). If you select this reason you are required to complete Sections A, B and F. However, if you can make this finding for some outfalls and pollutants, but not for others, you cannot select this reason; you will instead be able to identify which outfalls and which pollutants you can make this finding for in Section E.

Section A. Permit Tracking Number

Enter the National Pollutant Discharge Elimination System (NPDES) tracking number assigned by EPA's Stormwater Notice Processing Center to the facility. If you do not know the tracking number, you can find the tracking number assigned to your facility on EPA's Notice of Intent (NOI) Search website (www.epa.gov/npdes/noisearch)

Section B. Facility Information

1. Enter the facility's official or legal name. Unless the name of your facility has changed, please use the same name provided on your NOI. You can use EPA's NOI Search website (www.epa.gov/npdes/noisearch) to view your NOI.
- 2 a-d Enter the street address, including city, state, and zip code of the actual physical location of the facility. Do not use a P.O. Box.
3. (Optional) Identify the name, telephone number, and email address of the person who will serve as a contact for EPA on issues related to monitoring at your facility. This person should be able to answer questions related to stormwater discharges and monitoring or have immediate access to individuals with that knowledge. This person does not have to be the facility operator, but should have intimate knowledge of monitoring activities at the facility.
4. If the form was prepared by someone other than the person who is signing the certification statement in Section F (for example, if the MDMR was prepared by a member of the facility's stormwater pollution prevention team or a consultant for the certifier's signature), include the name, organization, phone number and email address of the MDMR preparer.

Section C. Discharge Information

1. Indicate the appropriate monitoring period (Quarter 1, 2, 3, or 4) covered by the MDMR. "Alternative" monitoring periods can apply to facilities located in arid and semi-arid climates, or in areas subject to snow or prolonged freezing. To use alternative monitoring periods, you must provide a revised monitoring schedule here in the first monitoring report submitted and indicate for which alternative monitoring period you are reporting monitoring data. If using alternative monitoring periods, identify the first day of the monitoring period through the last day of the monitoring period for each of the four periods. The dates should be displayed as month (Mo) / day (Day). See Parts 6.1.6 and 6.1.7 of the permit for more information.
2. If you are submitting benchmark monitoring data, identify if your facility is required to collect benchmark samples for one or more hardness-dependent metals (i.e., cadmium, copper, lead, nickel, silver, and zinc). If you select "yes" to this question you must also complete Question 2.a. and if you select "no" to this question you may skip to Section D.
- 2 a. If you selected "yes" for Question 2 under Section C, then you are required to submit to EPA with your first benchmark report a hardness level, established consistent with the procedures in Appendix J of the permit, which is representative of your receiving water. If your outfalls discharge to more than one receiving water as reported in your NOI form, you should report hardness for the receiving water with the lowest hardness values. Hardness values must be reported in milligrams per liter (mg/L).

Section D. Outfall Information

1. Enter the total number of outfalls identified in your stormwater pollution prevention plan (SWPPP). Outfalls are locations where stormwater exits the facility, including pipes, ditches, swales, and other structures used to remove stormwater from the facility.
2. Indicate if your facility has two or more outfalls that you believe discharge substantially identical effluents (i.e., stormwater), based on the similarities of the general industrial activities and control measures, exposed materials that may significantly contribute pollutants to stormwater, and runoff coefficients of their drainage areas. See Parts 5.1.5.2 and 6.1.1 of the permit for more information on substantially identical outfalls.
- 2 a. If you selected "yes" for Question 2 under Section D, then you must list the outfall name(s) in Column 3.B. that you expect to be substantially identical to the corresponding outfall in Column 3.A.
- 3 A. **Monitored Outfall Name:** List name(s) of outfall(s) you are required to monitor in Column 3.A.
- 3 B. **Substantially Identical Outfalls:** List name(s) of outfall(s) substantially identical to "Monitored Outfall" in Column 3.A. (if applicable)
- 3 C. **No Discharge:** Check box if you are reporting "No Discharge" for the monitored outfall for the reporting period identified in Section C.1.

Example:

3.A Monitored Outfall Name	3.B. Substantially Identical Outfall	3.C. No Discharge
Outfall A	Outfall B; Outfall C	<input type="checkbox"/>
Outfall D		<input checked="" type="checkbox"/>

Reference attachment if additional space is needed to complete the Table Section D.

Section E. Monitoring Information

1. Enter the NPDES tracking number assigned by EPA's Stormwater Notice Processing Center to the facility reported in Section A.
2. For the reported monitoring event indicate whether the discharge was from a rainfall or snowmelt event. If you select "rainfall" then indicate the duration (in hours) of the rainfall event, rainfall total (in inches) for that rainfall event, and time (in days) since the previous measurable storm event in line items 2.a-c. For both rainfall and snowmelt monitoring, you must identify the date of collection for the monitoring event in column 3.g. of the table. If the discharge occurs during a period of both rainfall and snowmelt, check both the rainfall and snowmelt boxes and report the appropriate rainfall information in item 2.a-c. To report multiple monitoring events in the same reporting period, copy Page 2 of this Form and enter each monitoring event separately with data for all outfalls sampled.

For each pollutant monitored at an outfall, you must complete one row in the Table as follows:

- 3.a. **Outfall Name:** Provide the outfall name for which you monitored (e.g., Outfall 1, Outfall 2, Outfall 3).
- 3.b. **Monitoring Type:** Provide the type of monitoring using the specified codes, in parentheses, below:
 - (QBM) – Quarterly benchmark monitoring
 - (ELG) – Annual effluent limitations guidelines monitoring;
 - (S/T) – State- or Tribal-specific monitoring;
 - (I) – Impaired waters monitoring; or
 - (O) – Other monitoring as required by EPA.
- 3.c. **Parameter(s):** Enter each "Parameter" (or "pollutant") monitored. For QBM and ELG monitoring, use the same parameter name as in Part 8 of the permit.
- 3.d. **Quality or Concentration:** Enter sample measurement value for each parameter analyzed and required to be reported. Enter "ND" (i.e., not detected) for any sample results below the method detection limit or "BQL" (i.e., below quantitation limit) for sample results above the detection limit but below the quantitation limit.
- 3.e. **Units:** Enter the units for sample measurement values (i.e., "mg/L" for milligrams per liter) for each parameter analyzed and required to be reported. For monitoring results reported as ND or BQL this space will be left blank and the units will be reported in Column 3.f.
- 3.f. **Results Description:** This section must be completed for any monitoring results reported as ND or BQL in the "Quality or Concentration" column. For ND, report the laboratory detection level and units in this column. For BQL, report the laboratory quantitation limit and units in this column.
- 3.g. **Collection Date:** Identify the sampling date for each parameter monitoring result reported on this form.
- 3.h. **Exceedance due to natural background pollutant levels:** Check box if following the first 4 quarters of benchmark monitoring (or sooner if the exceedance is triggered by less than 4 quarters of data) you have determined that the exceedance of the benchmark is attributable solely to the presence of that pollutant in the natural background for that outfall and any substantially identical outfalls. See Part 6.2.4.2 of the permit for more information. Attach supporting rationale for your determination to the submitted MDMR and reference attachment in Section E.4.
- 3.i. **No further pollutant reductions achievable:** Check box if after collection of 4 quarterly samples (or sooner if the exceedance is triggered by less than 4 quarters of data), the average of the 4 monitoring values for any parameter exceeds the benchmark and you have made the determination that no further pollutant reductions are technologically available and economically practicable and achievable in light of best industry practice to meet the technology-based

effluent limits or are necessary to meet the water-quality-based effluent limitations in Parts 2 of the permit (See Part 6.2.1. of the permit for more information) for that outfall and any substantially identical outfalls. Attach supporting rationale for your determination to the submitted MDMR and reference attachment in Section E.4.

4. Where violations of the permit requirements are reported, include a brief explanation to describe the cause and corrective actions taken, and reference each violation by date. Also, this section should include any additional comments such as are required when changing site status from inactive and unstaffed to active or vice versa. Attach additional pages if you need more space.

Attach additional copies of Section E as necessary to address all outfalls and parameters.

Section F. Certification

Enter "Name/Title of Principal Executive Officer or Authorized Agent" with "Signature of Principal Executive Officer or Authorized Agent," "Date" form was signed and email of the "Principal Executive Officer or Authorized Agent." If you submit multiple pages of Section E monitoring data, each page must be appropriately signed and certified as described below.

Certification statement and signature (see Section B.11 in Appendix B of the permit for more information). Federal statutes provide for severe penalties for submitting false information on this reporting form. Federal regulations require this form to be signed by one of the following individuals, or a duly authorized representative of that person, as follows:

For a corporation: by a responsible corporate officer, which means:

- (i) president, secretary, treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy or decision making functions for the corporation; or
- (ii) the manager of one or more manufacturing, production, or operating facilities, provided the manager is authorized to make management decisions which govern the operation of the regulated facility including having the explicit or implicit duty of making major capital investment recommendations, and initiating and directing other comprehensive measures to assure long term environmental compliance with environmental laws and regulations; the manager can ensure that the necessary systems are established or actions taken to gather complete and accurate information for permit application requirements; and where authority to sign documents has been assigned or delegated to the manager in accordance with corporate procedures;

For a partnership or sole proprietorship: by a general partner or the proprietor; or
For a municipal, State, Federal, or other public facility: by either a principal executive or ranking elected official.

Paperwork Reduction Act Notice

Public reporting burden for this certification is estimated to average 7.25 hours per response plus an additional 2 hours for respondents required to gather hardness data, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding the burden estimate, any other aspect of the collection of information, or suggestions for improving this form, including any suggestions which may increase or reduce this burden to: Director, Office of Environmental Information Services, Collection Services Division (2823), USEPA, 1200 Pennsylvania Avenue, NW, Washington, DC 20460. Include the OMB control number of this form on any correspondence. Do not send the completed MDMR form to this address.



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
WASHINGTON, DC 20460
MSGP INDUSTRIAL DISCHARGE MONITORING REPORT (MDMR)

Form Approved.
OMB No. 2040-0004

Reason(s) for Submission (Check all that apply):

- ☒ Submitting monitoring data (Fill in all Sections).
☐ Reporting no discharge for all outfalls for this monitoring period (Fill in Sections A, B, C 1, D, and F).
☐ Reporting that your site status has changed to inactive and unstaffed (Fill in Sections A, B, F and include date of status change in comment field in Section E.4).
☐ Reporting that your site status has changed to active (Fill in all Sections and include date of status change in comment field in Section E.4).
☐ Reporting that no further pollutant reductions are achievable for all outfalls and for all pollutants via Part 6.2.1.2 of the MSGP (Fill in Sections A, B and F).

A. Permit Tracking Number: **PRR05BL65**

Note: Read instructions before completing this Form.

B. Facility Information

1. Facility Name: **AES PUERTO RICO**

2. Facility Location:

a. Street: **PR-03 KM 142.0 BO. JOBOS**

b. City: **GUAYAMA**

c. State: **PR** d. Zip Code: **00785**

3. Additional Facility Information (Optional):

Contact Name: **MANUEL MATA**

Email: **manuel.mata@aes.com**

Phone: **787-866-8117** Ext. **2219**

4. MDMR Preparer (Complete if MDMR was prepared by someone other than the person signing the certification in Section F)

Prepared by: **HECTOR M AVILA**

Organization: **AES PUERTO RICO**

Email: **hector.avila@aes.com**

Phone: **787-866-8117** Ext. **2266**

C. Discharge Information

1. Identify monitoring period:

☒ Check here if proposing alternative monitoring periods due to irregular stormwater runoff. Identify alternative monitoring schedule and indicate for which alternative monitoring period you are reporting monitoring data:

☐ Quarter 1 (April 1 – June 30)

☐ Quarter 1: From **04** / **01** To **06** / **30**

☐ Quarter 2 (July 1 – September 30)

☒ Quarter 2: From **04** / **01** To **06** / **30**

☐ Quarter 3 (October 1 – December 31)

☐ Quarter 3: From **04** / **01** To **06** / **30**

☐ Quarter 4 (January 1 – March 31)

☐ Quarter 4: From **04** / **01** To **06** / **30**

2. Are you required to monitor for cadmium, copper, chromium, lead, nickel, silver, or zinc? ☒ Yes (Complete line item 2 a) ☐ No (Skip to Section D)

2a. What is the hardness level of the receiving water? **6800** mg/L

D. Outfall Information

1. How many outfall(s) are identified in your SWPPP? **03** List name of outfall(s) required to be monitored in table below.

2. Do any of your outfalls discharge substantially identical effluents? ☐ YES ☒ NO

2a. If yes, for each monitored outfall, indicate outfall names that are substantially identical in table below.

3 A. Monitored Outfall Name*	3.B. Substantially Identical Outfalls (List name(s) of outfall(s) substantially identical to outfall in 3 A (if applicable))	3.C. No Discharge?
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

*Reference attachment if additional space needed to complete the table

Instructions for Completing the MSGP Industrial Discharge Monitoring Report (MDMR)

Who Must Submit A Discharge Monitoring Report to EPA?

Facilities covered under the Multi-Sector General Permit (MSGP or permit) that are required to monitor pursuant to Parts 6.2, 6.3, and 8 of the permit must submit the MSGP Discharge Monitoring Report (MDMR) consistent with the reporting requirements specified in Part 7.1 of the permit.

Where to File the MDMR Form

Monitoring data collected pursuant to Parts 6.2, 6.3, and 8 of the permit must be submitted electronically via EPA's Electronic Notice of Intent System (eNOI), which can be found at www.epa.gov/npdes/enoi. Filing electronically will allow permittees to easily submit the results of monitoring data to EPA. If you cannot access eNOI, monitoring results must be reported on the paper MDMR form and sent to one of the following addresses:

Via U.S. mail

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Office of Water, Water Permits Division
Mail Code 4203M, ATTN: MSGP Reports
1200 Pennsylvania Avenue, NW
Washington, D.C. 20460

Via Overnight/Express Delivery

U.S. Environmental Protection Agency
Office of Water, Water Permits Division
Room 7420 ATTN: MSGP Reports
1201 Constitution Avenue, NW
Washington, D.C. 20004
Phone number: 202-564-9545

Completing the MDMR Form

To complete this form, type or print in uppercase letters in the appropriate areas only. Be sure that you complete all applicable questions. Photocopy your MDMR form for your records before you send the completed original form to the appropriate address above. Use ink when you sign and mail the original document – EPA will not accept photocopies. You may also use this paper form as a checklist for the information you will need when submitting a MDMR electronically via EPA's eNOI system.

Reasons for Submission

Indicate your reason(s) for submitting this MDMR by checking all boxes that apply. The reasons for submission are defined as follows:

- **Submitting monitoring data:** For each storm sampled, submit one MDMR form with data for all outfalls sampled. Select this reason even if you only have monitoring data for some of your outfalls (i.e., some outfalls did not discharge). If you select this reason you are required to complete all Sections of the form.
- **Reporting no discharge for all outfalls for this monitoring period:** Indicates that there were no discharges from all outfalls during this monitoring period. If you select this reason you are only required to complete Sections A, B, C, 1, D, and F.
- **Reporting that your site status has changed to inactive and unstaffed:** Indicates that your facility is currently inactive and unstaffed (See Part 6.2.1.3 of the permit for more information). If you select this reason you are only required to complete Sections A, B, and F and include date of status change in the comment field in Section E.4.
- **Reporting that your site status has changed from inactive to active:** Indicates that your facility is currently active (See Part 6.2.1.3 of the permit for more information). If you select this reason you are required to complete all Sections of the form and include date of status change in the comment field in Section E.4.
- **Reporting that no further reductions are achievable for all outfalls and for all pollutants via Part 6.2.1.2 of the permit:** Indicates that your facility has determined that no further pollutant reductions are technologically and economically practicable in light of best industry practice to meet the technology-based effluent limits or are necessary to meet the water-quality-based effluent limitations in Parts 2 of the permit (See Part 6.2.1.2 of the permit for more information). If you select this reason you are required to complete Sections A, B and F. However, if you can make this finding for some outfalls and pollutants, but not for others, you cannot select this reason; you will instead be able to identify which outfalls and which pollutants you can make this finding for in Section E.

Section A. Permit Tracking Number

Enter the National Pollutant Discharge Elimination System (NPDES) tracking number assigned by EPA's Stormwater Notice Processing Center to the facility. If you do not know the tracking number, you can find the tracking number assigned to your facility on EPA's Notice of Intent (NOI) Search website (www.epa.gov/npdes/noisearch).

Section B. Facility Information

1. Enter the facility's official or legal name. Unless the name of your facility has changed, please use the same name provided on your NOI. You can use EPA's NOI Search website (www.epa.gov/npdes/noisearch) to view your NOI.
- 2 a-d. Enter the street address, including city, state, and zip code of the actual physical location of the facility. Do not use a P.O. Box.
3. (Optional) Identify the name, telephone number, and email address of the person who will serve as a contact for EPA on issues related to monitoring at your facility. This person should be able to answer questions related to stormwater discharges and monitoring or have immediate access to individuals with that knowledge. This person does not have to be the facility operator, but should have intimate knowledge of monitoring activities at the facility.
4. If the form was prepared by someone other than the person who is signing the certification statement in Section F (for example, if the MDMR was prepared by a member of the facility's stormwater pollution prevention team or a consultant for the certifier's signature), include the name, organization, phone number and email address of the MDMR preparer.

Section C. Discharge Information

1. Indicate the appropriate monitoring period (Quarter 1, 2, 3, or 4) covered by the MDMR. "Alternative" monitoring periods can apply to facilities located in arid and semi-arid climates, or in areas subject to snow or prolonged freezing. To use alternative monitoring periods, you must provide a revised monitoring schedule here in the first monitoring report submitted and indicate for which alternative monitoring period you are reporting monitoring data. If using alternative monitoring periods, identify the first day of the monitoring period through the last day of the monitoring period for each of the four periods. The dates should be displayed as month (Mo) / day (Day). See Parts 6.1.6 and 6.1.7 of the permit for more information.
2. If you are submitting benchmark monitoring data, identify if your facility is required to collect benchmark samples for one or more hardness-dependent metals (i.e., cadmium, copper, lead, nickel, silver, and zinc). If you select "yes" to this question you must also complete Question 2.a. and if you select "no" to this question you may skip to Section D.
- 2.a. If you selected "yes" for Question 2 under Section C, then you are required to submit to EPA with your first benchmark report a hardness level, established consistent with the procedures in Appendix J of the permit, which is representative of your receiving water. If your outfalls discharge to more than one receiving water, as reported in your NOI form, you should report hardness for the receiving water with the lowest hardness values. Hardness values must be reported in milligrams per liter (mg/L).

Section D. Outfall Information

1. Enter the total number of outfalls identified in your stormwater pollution prevention plan (SWPPP). Outfalls are locations where stormwater exits the facility, including pipes, ditches, swales, and other structures used to remove stormwater from the facility.
2. Indicate if your facility has two or more outfalls that you believe discharge substantially identical effluents (i.e., stormwater), based on the similarities of the general industrial activities and control measures, exposed materials that may significantly contribute pollutants to stormwater, and runoff coefficients of their drainage areas. See Parts 5.1.5.2 and 6.1.1 of the permit for more information on substantially identical outfalls.
- 2.a. If you selected "yes" for Question 2 under Section D, then you must list the outfall name(s) in Column 3.B. that you expect to be substantially identical to the corresponding outfall in Column 3.A.
- 3.A. **Monitored Outfall Name:** List name(s) of outfall(s) you are required to monitor in Column 3.A.
- 3.B. **Substantially Identical Outfalls:** List name(s) of outfall(s) substantially identical to "Monitored Outfall" in Column 3.A. (if applicable).
- 3.C. **No Discharge:** Check box if you are reporting "No Discharge" for the monitored outfall for the reporting period identified in Section C.1.

Example:

3.A Monitored Outfall Name	3.B. Substantially Identical Outfall	3.C. No Discharge
Outfall A	Outfall B; Outfall C	<input type="checkbox"/>
Outfall D		<input checked="" type="checkbox"/>

Reference attachment if additional space is needed to complete the Table Section D.

Section E. Monitoring Information

1. Enter the NPDES tracking number assigned by EPA's Stormwater Notice Processing Center to the facility reported in Section A.
2. For the reported monitoring event indicate whether the discharge was from a rainfall or snowmelt event. If you select "rainfall" then indicate the duration (in hours) of the rainfall event, rainfall total (in inches) for that rainfall event, and time (in days) since the previous measurable storm event in line items 2.a-c. For both rainfall and snowmelt monitoring, you must identify the date of collection for the monitoring event in column 3.g. of the table. If the discharge occurs during a period of both rainfall and snowmelt, check both the rainfall and snowmelt boxes and report the appropriate rainfall information in item 2.a-c. To report multiple monitoring events in the same reporting period, copy Page 2 of this Form and enter each monitoring event separately with data for all outfalls sampled.

For each pollutant monitored at an outfall, you must complete one row in the Table as follows:

- 3.a. **Outfall Name:** Provide the outfall name for which you monitored (e.g., Outfall 1, Outfall 2, Outfall 3).
- 3.b. **Monitoring Type:** Provide the type of monitoring using the specified codes in parentheses, below:
 - (QBM) – Quarterly benchmark monitoring
 - (ELG) – Annual effluent limitations guidelines monitoring;
 - (S/T) – State- or Tribal-specific monitoring;
 - (I) – Impaired waters monitoring, or
 - (O) – Other monitoring as required by EPA.
- 3.c. **Parameter(s):** Enter each "Parameter" (or "pollutant") monitored. For QBM and ELG monitoring, use the same parameter name as in Part 8 of the permit.
- 3.d. **Quality or Concentration:** Enter sample measurement value for each parameter analyzed and required to be reported. Enter "ND" (i.e., not detected) for any sample results below the method detection limit or "BQL" (i.e., below quantitation limit) for sample results above the detection limit but below the quantitation limit.
- 3.e. **Units:** Enter the units for sample measurement values (i.e., "mg/L" for milligrams per liter) for each parameter analyzed and required to be reported. For monitoring results reported as ND or BQL this space will be left blank and the units will be reported in Column 3.f.
- 3.f. **Results Description:** This section must be completed for any monitoring results reported as ND or BQL in the "Quality or Concentration" column. For ND, report the laboratory detection level and units in this column. For BQL, report the laboratory quantitation limit and units in this column.
- 3.g. **Collection Date:** Identify the sampling date for each parameter monitoring result reported on this form.
- 3.h. **Exceedance due to natural background pollutant levels:** Check box if following the first 4 quarters of benchmark monitoring (or sooner if the exceedance is triggered by less than 4 quarters of data) you have determined that the exceedance of the benchmark is attributable solely to the presence of that pollutant in the natural background for that outfall and any substantially identical outfalls. See Part 6.2.4.2 of the permit for more information. Attach supporting rationale for your determination to the submitted MDMR and reference attachment in Section E 4.
- 3.i. **No further pollutant reductions achievable:** Check box if after collection of 4 quarterly samples (or sooner if the exceedance is triggered by less than 4 quarters of data), the average of the 4 monitoring values for any parameter exceeds the benchmark and you have made the determination that no further pollutant reductions are technologically available and economically practicable and achievable in light of best industry practice to meet the technology-based

effluent limits or are necessary to meet the water-quality-based effluent limitations in Parts 2 of the permit (See Part 6.2.1. of the permit for more information) for that outfall and any substantially identical outfalls. Attach supporting rationale for your determination to the submitted MDMR and reference attachment in Section E.4.

4. Where violations of the permit requirements are reported, include a brief explanation to describe the cause and corrective actions taken, and reference each violation by date. Also, this section should include any additional comments such as are required when changing site status from inactive and unstaffed to active or vice versa. Attach additional pages if you need more space.

Attach additional copies of Section E as necessary to address all outfalls and parameters.

Section F. Certification

Enter "Name/Title of Principal Executive Officer or Authorized Agent" with "Signature of Principal Executive Officer or Authorized Agent," "Date" form was signed and email of the "Principal Executive Officer or Authorized Agent." If you submit multiple pages of Section E monitoring data, each page must be appropriately signed and certified as described below.

Certification statement and signature (see Section B.11 in Appendix B of the permit for more information). Federal statutes provide for severe penalties for submitting false information on this reporting form. Federal regulations require this form to be signed by one of the following individuals, or a duly authorized representative of that person, as follows:

For a corporation: by a responsible corporate officer, which means:

- (i) president, secretary, treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy or decision making functions for the corporation, or
- (ii) the manager of one or more manufacturing, production, or operating facilities, provided the manager is authorized to make management decisions which govern the operation of the regulated facility including having the explicit or implicit duty of making major capital investment recommendations, and initiating and directing other comprehensive measures to assure long term environmental compliance with environmental laws and regulations; the manager can ensure that the necessary systems are established or actions taken to gather complete and accurate information for permit application requirements; and where authority to sign documents has been assigned or delegated to the manager in accordance with corporate procedures;

For a partnership or sole proprietorship: by a general partner or the proprietor; or
For a municipal, State, Federal, or other public facility: by either a principal executive or ranking elected official.

Paperwork Reduction Act Notice

Public reporting burden for this certification is estimated to average 7.25 hours per response plus an additional 2 hours for respondents required to gather hardness data, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding the burden estimate, any other aspect of the collection of information, or suggestions for improving this form, including any suggestions which may increase or reduce this burden to: Director, Office of Environmental Information Services, Collection Services Division (2823), USEPA, 1200 Pennsylvania Avenue, NW, Washington, DC 20460. Include the OMB control number of this form on any correspondence. Do not send the completed MDMR form to this address



BECKTON ENVIRONMENTAL
LABORATORIES, INC.



REPORT OF ANALYSIS

ATTENTION: Mr. Héctor Ávila
COMPANY: AES Puerto Rico - Guayama

DATE: April 11, 2014

CONTRACT: AES - Guayama

LAB. SAMPLE ID: BEL-1401355
SAMPLE COLLECTED BY: Client
DATE RECEIVED: 04/04/14

SAMPLE DATE: 04/02/14
TIME: 15:17

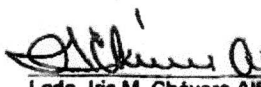
DESCRIPTION: 004
LAB. FILE ID: 1401355
MATRIX: Water

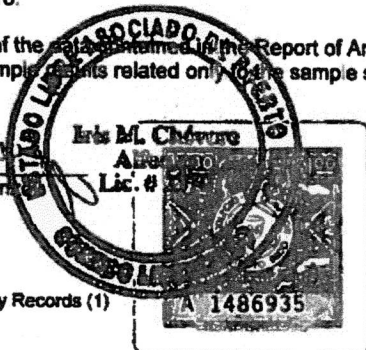
PARAMETER	EPA METHOD	SAMPLE TYPE	UNITS	BEL-1401355	METHOD DETECTION LIMIT	ANALYST	DATE ANALYZED
Hardness, Total	SM 2340 C*	Grab	mg/L	132	3.50	HM	04/07/14
Aluminum	200.7(ICAP)	Grab	mg/L	7.20	0.010	BTR	04/09/14
Iron	200.7(ICAP)	Grab	mg/L	7.25	0.010	BTR	04/09/14
Lead	200.7(ICAP)	Grab	mg/L	0.026	0.001	BTR	04/09/14
Zinc	200.7(ICAP)	Grab	mg/L	0.439	0.001	BTR	04/09/14

*Standard Methods for the Examination of Water and Waste Water, 19th Edition, 1995.

Method Detection Limit (MDL)-The minimum concentration of a substance that can be measured and reported with 99% confidence that the value is above zero.

Certification and release of the data contained in the Report of Analysis has been authorized by the Laboratory Manager or the Manager's Designee. Sample results related only to the sample submitted.


Lda. Iris M. Chévere Alfaro
Laboratory Director
Chemist License 2370



Attachment Chain of Custody Records (1)

PAGE 1 OF 1

THE NELAC CERTIFIED ANALYSES MEET ALL REQUIREMENTS OF NELAC STANDARDS.
REFER OUR SERVICE DEPARTMENT FOR THE CURRENT LIST OF CERTIFIED ANALYSES.
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• CERTIFICATION NUMBER E87556 •
192 VILLA STREET • PONCE, PR 00730-4875 • TEL. (787) 841-7373 • FAX (787) 841-7313

BECKTON ENVIRONMENTAL LABORATORIES

192 Villa Street • Ponce, P.R. 00730-4875

Tel. 787-841-7373 • Fax 787-841-7313

REVISION 2009

CHAIN OF CUSTODY RECORD

PROJECT NO.	COMPANY <i>AES Guayama</i>	SAMPLER <i>Client</i>
SAMPLE LOCATION/CLIENT ID <i>004</i>	TIME <i>15:17 AM</i>	CONTROL NO. <i>173743</i>
SAMPLE DATE <i>4-2-14</i>	BEL. NO. <i>1401355</i>	

1. General Environmental:	PC	VSS	PC	Sampling Witness;
Acidity ()	—	Alkalinity ()	—	Date/Time:
Ammonia as N ()	—	Bicarbonate ()	—	Relinquished by:
BOD-5 ()	—	Bromide ()	—	Date/Time: <i>4/2/14 11:20 am</i>
Chloride ()	—	Chlorine, Res. ()	—	Received by: <i>[Signature]</i>
COD ()	—	Color (ADMI) ()	—	Date/Time: <i>4/4/14 11:20 am</i>
Conductivity μ mhos/cm ()	—	Co. or (Pt-Co) ()	—	Relinquished by: <i>[Signature]</i>
Dissolved Oxygen ()	—	Cyanide ()	—	Date/Time: <i>4/4/14 1:38 pm</i>
Hardness ()	<i>1.2</i>	Fluoride ()	—	Received by: <i>[Signature]</i>
Moisture % ()	—	Iodide ()	—	Date/Time: <i>4/4/14 1:38 pm</i>
Nitrite ()	—	Nitrate ()	—	Relinquished by:
Oil+Grease ()	—	Nitrate + Nitrite ()	—	Date/Time:
Phenol ()	—	pH, S.U. ()	—	Received by:
Phosphorus, Total ()	—	Phosphate, Ortho ()	—	Date/Time:
Sett. Solids mg/L ()	—	Sett. Solids mL/L ()	—	Relinquished by:
Sulfate ()	—	Solids, Total ()	—	Date/Time:
Sulfite ()	—	Sulfide ()	—	Received by:
TDS ()	—	Surfactant ()	—	Date/Time:
Temperature, °C ()	—	TSS ()	—	Relinquished by:
TOC ()	—	TKN ()	—	Date/Time:
Asbestos ()	—	Turbidity ()	—	Received by:
TVS ()	—	Carbonate ()	—	Date/Time:
Total Nitrogen ()	—		—	Received by:
2. Metals:				Date/Time:
Aluminum (Al) ()	<i>1.3</i>	Cadmium (Cd) ()	—	Received by:
Chromium (Cr) ()	—	Copper (Cu) ()	—	Date/Time:
Iron (Fe) ()	<i>1.3</i>	Lead (Pb) ()	<i>1.3</i>	Matrix
Manganese (Mn) ()	—	Mercury (Hg) ()	—	air () water () sludge ()
Nickel (Ni) ()	—	Selenium (Se) ()	—	liquid () soil () solid ()
Silver (Ag) ()	—	Tin (Sn) ()	—	oil () mixed () other ()
Zinc (Zn) ()	<i>1.5</i>	Arsenic (As) ()	—	Specify:
Barium (Ba) ()	—	Boron (B) ()	—	Preservative Codes = PC
Antimony (Sb) ()	—	Beryllium (Be) ()	—	1. Cool, <6°C
Bismuth (Bi) ()	—	Calcium (Ca) ()	—	2. Sulfuric Acid (H ₂ SO ₄) pH<2
Chromium, VI (CrVI) ()	—	Cobalt (Co) ()	—	3. Nitric Acid (HNO ₃) pH<2
Magnesium (Mg) ()	—	Molybdenum (Mo) ()	—	4. Hydrochloric acid (HCl)
Potassium (K) ()	—	Silicon (Si) ()	—	5. Sodium Thiosulfate
Sodium (Na) ()	—	Strontium (Sr) ()	—	6. Sodium Hydroxide (NaOH)
Thallium (Tl) ()	—	Titanium (Ti) ()	—	7. Zinc Acetate
Vanadium (V) ()	—	Lithium (Li) ()	—	8. Ascorbic Acid
3. RCRA/Hazardous wastes				9. FAS
Ignitability (Flash Pt.) ()	—	Corrosivity ()	—	10. Other
Reactivity (CN & S) ()	—	TCLP ()	—	Sample type legend:
RCRA Metals ()	—	Organics-Pest/Herb ()	—	grab samples x
Organics-BNA ()	—	Organics-VOA ()	—	composite samples xx
TOX ()	—		—	Turnaround time: Sampling Equipment:
4. Specific Organics				1 day () Automatic Sampler ()
Volatiles ()	—	Phenols GC ()	—	2 days () Sample Pick Up ()
Pesticides/PCB's ()	—	Semi-Volatiles (BNA) ()	—	3 days ()
Herbicides ()	—	PCB's Only ()	—	5 days ()
BTEX ()	—	TPH 418.1 ()	—	Note: normal turnaround time is ten (10) working days,
TTO & Dioxin ()	—	TTO ()	—	additional charges apply for rush orders.
	—	TPH 8015 ()	—	
	—	Lindane ()	—	
5. Microbiology				
Fecal Coliform ()	—	Total Coliform ()	—	

Comments:

Original



BECKTON ENVIRONMENTAL
LABORATORIES, INC.



REPORT OF ANALYSIS

ATTENTION: Mr. Héctor Ávila
COMPANY: AES Puerto Rico - Guayama

DATE: April 11, 2014

CONTRACT: AES - Guayama

LAB. SAMPLE ID: BEL-1401356
SAMPLE COLLECTED BY: Client
DATE RECEIVED: 04/04/14

SAMPLE DATE: 04/02/14
TIME: 15:00

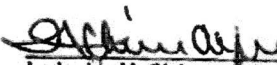
DESCRIPTION: 002
LAB. FILE ID: 1401356
MATRIX: Water

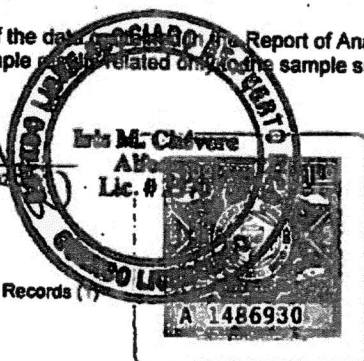
PARAMETER	EPA METHOD	SAMPLE TYPE	UNITS	BEL-1401356	METHOD DETECTION LIMIT	ANALYST	DATE ANALYZED
Hardness, Total	SM 2340 C*	Grab	mg/L	136.	3.50	HM	04/07/14
Aluminum	200.7(ICAP)	Grab	mg/L	1.63	0.010	BTR	04/09/14
Iron	200.7(ICAP)	Grab	mg/L	1.52	0.010	BTR	04/09/14
Lead	200.7(ICAP)	Grab	mg/L	0.010	0.001	BTR	04/09/14
Zinc	200.7(ICAP)	Grab	mg/L	0.014	0.001	BTR	04/09/14

*Standard Methods for the Examination of Water and Waste Water, 19th Edition, 1995.

Method Detection Limit (MDL)-The minimum concentration of a substance that can be measured and reported with 99% confidence that the value is above zero.

Certification and release of the data on this Report of Analysis has been authorized by the Laboratory Manager or the Manager's Designee. Sample results related only to the sample submitted.


Lcda. Iris M. Chévere Alfaro
Laboratory Director
Chemist License 2370



Attachment: Chain of Custody Records ()

PAGE 1 OF 1

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• CERTIFICATION NUMBER E87556 •
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192 Villa Street • Ponce, P.R. 00730-4875

Tel: 787-841-7373 • Fax 787-841-7313

REVISION 2009

CHAIN OF CUSTODY RECORD

PROJECT NO	COMPANY <i>AES Guayama</i>	SAMPLER <i>diat</i>
SAMPLE LOCATION/CLIENT ID <i>002</i>	TIME <i>15:00 AM</i>	CONTROL NO.
SAMPLE DATE <i>4-2-14</i>	REL. NO. <i>1401356</i>	<i>174473</i>

1. General Environmental	PC	VSS	PC
Acidity ()	—	Alkalinity ()	—
Ammonia as N ()	—	Bicarbonate ()	—
BOD-5 ()	—	Bromide ()	—
Chloride ()	—	Chlorine, Res ()	—
COD ()	—	Color (ADMI) ()	—
Conductivity μ mhos/cm ()	—	Color (Pt-Co) ()	—
Dissolved Oxygen ()	—	Cyanide ()	—
Hardness (X) <i>1.3</i>	—	Fluoride ()	—
Moisture % ()	—	Iodide ()	—
Nitrite ()	—	Nitrate ()	—
Oil+Grease ()	—	Nitrate + Nitrite ()	—
Phenol ()	—	pH, S.U. ()	—
Phosphorus, Total ()	—	Phosphate, Ortho ()	—
Sett. Solids mg/L ()	—	Sett. Solids mL/L ()	—
Sulfate ()	—	Solids, Total ()	—
Sulfite ()	—	Sulfide ()	—
TDS ()	—	Surfactant ()	—
Temperature, °C ()	—	TSS ()	—
TOC ()	—	TKN ()	—
Asbestos ()	—	Turbidity ()	—
TVS ()	—	Carbonate ()	—
Total Nitrogen ()	—		—
2. Metals:			
Aluminum (Al) (X) <i>1.3</i>	—	Cadmium (Cd) ()	—
Chromium (Cr) ()	—	Copper (Cu) ()	—
Iron (Fe) (X) <i>1.3</i>	—	Lead (Pb) (X) <i>1.3</i>	—
Manganese (Mn) ()	—	Mercury (Hg) ()	—
Nickel (Ni) ()	—	Selenium (Se) ()	—
Silver (Ag) ()	—	Tin (Sn) ()	—
Zinc (Zn) (X) <i>1.3</i>	—	Arsenic (As) ()	—
Barium (Ba) ()	—	Boron (B) ()	—
Antimony (Sb) ()	—	Beryllium (Be) ()	—
Bismuth (Bi) ()	—	Calcium (Ca) ()	—
Chromium, VI (CrVI) ()	—	Cobalt (Co) ()	—
Magnesium (Mg) ()	—	Molybdenum (Mo) ()	—
Potassium (K) ()	—	Silicon (Si) ()	—
Sodium (Na) ()	—	Strontium (Sr) ()	—
Thallium (Tl) ()	—	Titanium (Ti) ()	—
Vanadium (V) ()	—	Lithium (Li) ()	—
3. RCRA/Hazardous wastes			
Ignitability (Flash Pt.) ()	—	Corrosivity ()	—
Reactivity (CN & S) ()	—	TCLP ()	—
RCRA Metals ()	—	Organics-Pest/Herb ()	—
Organics-BNA ()	—	Organics-VOA ()	—
TOX ()	—		—
4. Specific Organics			
Volatiles ()	—	Phenols GC ()	—
Pesticides/PCB's ()	—	Semi-Volatiles (BNA) ()	—
Herbicides ()	—	PCB's Only ()	—
BTEX ()	—	TPH 418.1 ()	—
TTO & Dioxin ()	—	TTO ()	—
	—	TPH 8015 ()	—
	—	Lindane ()	—
5. Microbiology			
Fecal Coliform ()	—	Total Coliform ()	—

Comments:

Sampling Witness:

Date/Time:

Relinquished by:

Date/Time:

Received by:

Date/Time:

Relinquished by:

Date/Time:

Received by:

Date/Time:

Relinquished by:

Date/Time:

Received by:

Date/Time:

Matrix

air () water (X) sludge ()
 liquid () soil () solid ()
 oil () mixed () other ()

Specify:

Preservative Codes = PC

- | | |
|---|----------------------------|
| 1. Cool, <6°C | 6. Sodium Hydroxide (NaOH) |
| 2. Sulfuric Acid (H ₂ SO ₄) pH<2 | 7. Zinc Acetate |
| 3. Nitric Acid (HNO ₃), pH<2 | 8. Ascorbic Acid |
| 4. Hydrochloric acid (HCl) | 9. FAS |
| 5. Sodium Thiosulfate | 10. Other |

Sample type legend:

grab samples x
 composite samples xx

Turnaround time: Sampling Equipment:

1 day () Automatic Sampler ()
 2 days () Sample Pick Up ()
 3 days ()
 5 days ()

Note: normal turnaround time is ten (10) working days;
 additional charges apply for rush orders.

Original



BECKTON ENVIRONMENTAL
LABORATORIES, INC.



REPORT OF ANALYSIS

ATTENTION: Mr. Héctor Ávila
COMPANY: AES Puerto Rico - Guayama

DATE: April 29, 2014

CONTRACT: AES - Guayama

LAB. SAMPLE ID: BEL-1401633
SAMPLE COLLECTED BY: Client (H. Ávila)
DATE RECEIVED: 04/18/14

SAMPLE DATE: 04/10/14
TIME: 7:20AM

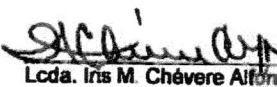
DESCRIPTION: Stormwater 003A
LAB. FILE ID: 1401633
MATRIX: Water

PARAMETER	EPA METHOD	SAMPLE TYPE	UNITS	BEL-1401633	METHOD DETECTION LIMIT	ANALYST	DATE ANALYZED
Hardness, Total	SM 2340 C*	Grab	mg/L	1,200	3.50	HM	04/23/14
Aluminum	200.7(ICAP)	Grab	mg/L	0.068	0.010	BTR	04/24/14
Iron	200.7(ICAP)	Grab	mg/L	0.023	0.010	BTR	04/24/14
Lead	200.7(ICAP)	Grab	mg/L	0.010	0.001	BTR	04/24/14
Zinc	200.7(ICAP)	Grab	mg/L	0.057	0.001	BTR	04/24/14

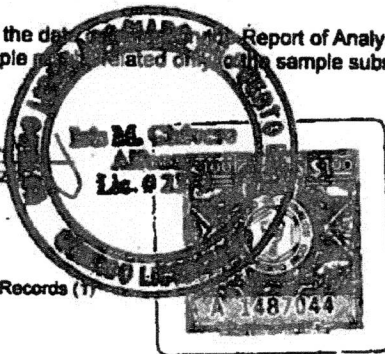
*Standard Methods for the Examination of Water and Waste Water, 19th Edition, 1995.

Method Detection Limit (MDL)-The minimum concentration of a substance that can be measured and reported with 99% confidence that the value is above zero

Certification and release of the data in this Report of Analysis has been authorized by the Laboratory Manager or the Manager's Designee. Sample related only to the sample submitted.


Lcda. Iris M. Chévere Alfaro
Laboratory Director
Chemist License 2370

Attachment: Chain of Custody Records (1)



PAGE 1 OF 1

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• 192 Villa Street • Ponce, P.R. 00730-4875

Tel. 787-841-7373 • Fax 787-841-7313

REVISION 2009

CHAIN OF CUSTODY RECORD

PROJECT NO	COMPANY AES Guayama	SAMPLER H. Avila
SAMPLE LOCATION/CLIENT ID Storm Water 003 A	TIME 7:20 AM	CONTROL NO. 175914
SAMPLE DATE 4/10/14	REL NO. 140633	

1. General Environmental:	PC	VSS	PC
Acidity ()	—	Alkalinity ()	—
Ammonia as N ()	—	Bicarbonate ()	—
BOD-5 ()	—	Bromide ()	—
Chloride ()	—	Chlorine, Res. ()	—
COD ()	—	Color (ADMI) ()	—
Conductivity μ mhos/cm ()	—	Color (Pt-Co) ()	—
Dissolved Oxygen ()	—	Cyanide ()	—
Hardness ()	13	Fluoride ()	—
Moisture % ()	—	Iodide ()	—
Nitrite ()	—	Nitrate ()	—
Oil+Grease ()	—	Nitrate + Nitrite ()	—
Phenol ()	—	pH, S.U. ()	—
Phosphorus, Total ()	—	Phosphate, Ortho ()	—
Sett Solids mg/L ()	—	Sett. Solids mL/L ()	—
Sulfate ()	—	Solids, Total ()	—
Sulfite ()	—	Sulfide ()	—
TDS ()	—	Surfactant ()	—
Temperature, °C ()	—	TSS ()	—
TOC ()	—	TKN ()	—
Asbestos ()	—	Turbidity ()	—
TVS ()	—	Carbonate ()	—
Total Nitrogen ()	—		
2. Metals:			
Aluminum (Al) (X) 13		Cadmium (Cd) ()	—
Chromium (Cr) ()	—	Copper (Cu) ()	—
Iron (Fe) (X) 13		Lead (Pb) (X) 13	
Manganese (Mn) ()	—	Mercury (Hg) ()	—
Nickel (Ni) ()	—	Selenium (Se) ()	—
Silver (Ag) ()	—	Tin (Sn) ()	—
Zinc (Zn) (X) 13		Arsenic (As) ()	—
Barium (Ba) ()	—	Boron (B) ()	—
Antimony (Sb) ()	—	Beryllium (Be) ()	—
Bismuth (Bi) ()	—	Calcium (Ca) ()	—
Chromium, VI (CrVI) ()	—	Cobalt (Co) ()	—
Magnesium (Mg) ()	—	Molybdenum (Mo) ()	—
Potassium (K) ()	—	Silicon (Si) ()	—
Sodium (Na) ()	—	Strontium (Sr) ()	—
Thallium (Tl) ()	—	Titanium (Ti) ()	—
Vanadium (V) ()	—	Lithium (Li) ()	—
3. RCRA/Hazardous wastes			
Ignitability (Flash Pt.) ()	—	Corrosivity ()	—
Reactivity (CN & S) ()	—	TCLP ()	—
RCRA Metals ()	—	Organics-Pest/Herb ()	—
Organics-BNA ()	—	Organics-VOA ()	—
TOX ()	—		
4. Specific Organics			
Volatiles ()	—	Phenols GC ()	—
Pesticides/PCB's ()	—	Semi-Volatiles (BNA) ()	—
Herbicides ()	—	PCB's Only ()	—
BTEX ()	—	TPH 418 I ()	—
TTO & Dioxin ()	—	TTO ()	—
	—	TPH 8015 ()	—
	—	Lindane ()	—
5. Microbiology			
Fecal Coliform ()	—	Total Coliform ()	—

Comments: _____

Sampling Witness: _____
 Date/Time: _____
 Relinquished by: *[Signature]* **4/16/2014 1:10 pm**
 Date/Time: _____
 Received by: *[Signature]*
 Date/Time: **4/16/14 1:10 pm**
 Relinquished by: *[Signature]*
 Date/Time: **4/16/14 2:40 pm**
 Received by: *[Signature]*
 Date/Time: **4/16/14 2:40 pm**
 Relinquished by: _____

Date/Time: _____
 Received by: _____
 Date/Time: _____

Matrix

air () water (X) sludge ()
 liquid () soil () solid ()
 oil () mixed () other ()

Specify: _____

Preservative Codes = PC

- | | |
|---|----------------------------|
| 1. Cool, <6°C | 6. Sodium Hydroxide (NaOH) |
| 2. Sulfuric Acid (H ₂ SO ₄) pH<2 | 7. Zinc Acetate |
| 3. Nitric Acid (HNO ₃), pH<2 | 8. Ascorbic Acid |
| 4. Hydrochloric acid (HCl) | 9. FAS |
| 5. Sodium Thiosulfate | 10. Other |

Sample type legend:

grab samples X
 composite samples XX

Turnaround time: Sampling Equipment:

1 day () Automatic Sampler ()
 2 days () Sample Pick Up (X)
 3 days ()
 5 days ()

Note: normal turnaround time is ten (10) working days;
 additional charges apply for rush orders.

Original



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
WASHINGTON, DC 20460
MSGP INDUSTRIAL DISCHARGE MONITORING REPORT (MDMR)

Form Approved.
OMB No. 2040-0004

Reason(s) for Submission (Check all that apply):

- ☒ Submitting monitoring data (Fill in all Sections).
☐ Reporting no discharge for all outfalls for this monitoring period (Fill in Sections A, B, C.1, D, and F).
☐ Reporting that your site status has changed to inactive and unstaffed (Fill in Sections A, B, F and include date of status change in comment field in Section E.4).
☐ Reporting that your site status has changed to active (Fill in all Sections and include date of status change in comment field in Section E.4).
☐ Reporting that no further pollutant reductions are achievable for all outfalls and for all pollutants via Part 6.2.1.2 of the MSGP (Fill in Sections A, B and F).

A. Permit Tracking Number: **PRR05BL65**

Note: Read instructions before completing this Form.

B. Facility Information

1. Facility Name: **AES PUERTO RICO**

2. Facility Location:

a. Street: **PR-03 KM 142.0 BO. JOBOS**

b. City: **GUAYAMA**

c. State: **PR** d. Zip Code: **00785**

3. Additional Facility Information (Optional):

Contact Name: **RON RODRIQUE**

Email: **ron.rodrique@aes.clm**

Phone: **787-866-8117** Ext. **2219**

4. MDMR Preparer (Complete if MDMR was prepared by someone other than the person signing the certification in Section F)

Prepared by: **HECTOR M AVILA**

Organization: **AES PUERTO RICO**

Email: **hector.avila@aes.com**

Phone: **787-866-8117** Ext. **2266**

C. Discharge Information

1. Identify monitoring period:

☒ Check here if proposing alternative monitoring periods due to irregular stormwater runoff. Identify alternative monitoring schedule and indicate for which alternative monitoring period you are reporting monitoring data:

☐ Quarter 1 (April 1 – June 30)

☐ Quarter 1: From **01/01** To **03/31**

☐ Quarter 2 (July 1 – September 30)

☐ Quarter 2: From **04/01** To **06/30**

☐ Quarter 3 (October 1 – December 31)

☒ Quarter 3: From **07/01** To **09/30**

☐ Quarter 4 (January 1 – March 31)

☐ Quarter 4: From **10/01** To **12/31**

2. Are you required to monitor for cadmium, copper, chromium, lead, nickel, silver, or zinc? ☒ Yes (Complete line item 2.a.) ☐ No (Skip to Section D)

2.a. What is the hardness level of the receiving water? **6800** mg/L

D. Outfall Information

1. How many outfall(s) are identified in your SWPPP? **03** List name of outfall(s) required to be monitored in table below.

2. Do any of your outfalls discharge substantially identical effluents? ☐ YES ☒ NO

2.a. If yes, for each monitored outfall, indicate outfall names that are substantially identical in table below.

3.A. Monitored Outfall Name*	3.B. Substantially Identical Outfalls [List name(s) of outfall(s) substantially identical to outfall in 3.A. (if applicable)]	3.C. No Discharge?
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

*Reference attachment if additional space needed to complete the table.



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
WASHINGTON, DC 20460
MSGP INDUSTRIAL DISCHARGE MONITORING REPORT (MDMR)

Form Approved. OMB No. 2040-0004

E. Monitoring Information

Note: Make additional copies of this form as necessary.

1. Permit Tracking Number: PRR05BL65

2. Nature of Discharge: ☒ Rainfall (Complete line items 2.a., 2.b., & 2.c.) ☐ Snowmelt

2.a. Duration of the rainfall event (hours): 02 2.b. Rainfall amount (inches): 00 5 2.c. Time since previous measurable storm event (days): 00 4

3.a. Outfall Name	3.b. Monitoring Type (QBM, ELG, S/T, I, O)*	3.c. Parameter	3.d. Quality or Concentration	3.e. Units	3.f. Results Description	3.g. Collection Date	3.h. Exceedance due to natural background pollutant levels	3.i. No further pollutant reductions achievable?
002	QBM	Aluminum	0.313	mg/L		07/18/14	<input type="checkbox"/>	<input type="checkbox"/>
002	QBM	Iron	0.102	mg/L		07/18/14	<input type="checkbox"/>	<input type="checkbox"/>
002	QBM	Lead	ND	mg/L	0.001	07/18/14	<input type="checkbox"/>	<input type="checkbox"/>
002	QBM	Zinc	0.016	mg/L		07/18/14	<input type="checkbox"/>	<input type="checkbox"/>
004	QBM	Aluminum	0.248	mg/L		07/18/14	<input type="checkbox"/>	<input type="checkbox"/>
004	QBM	Iron	0.134	mg/L		07/18/14	<input type="checkbox"/>	<input type="checkbox"/>
004	QBM	Lead	ND	mg/L	0.001	07/18/14	<input type="checkbox"/>	<input type="checkbox"/>
004	QBM	Zinc	0.025	mg/L		07/18/14	<input type="checkbox"/>	<input type="checkbox"/>
003	QBM	Aluminum	0.134	mg/L		07/18/14	<input type="checkbox"/>	<input type="checkbox"/>
003	QBM	Iron	0.119	mg/L		07/18/14	<input type="checkbox"/>	<input type="checkbox"/>
003	QBM	Lead	0.004	mg/L		07/18/14	<input type="checkbox"/>	<input type="checkbox"/>
003	QBM	Zinc	0.005	mg/L		07/18/14	<input type="checkbox"/>	<input type="checkbox"/>

* (QBM) - Quarterly benchmark monitoring; (ELG) - Annual effluent limitations guidelines monitoring; (S/T) - State- or Tribal-specific monitoring; (I) - Impaired waters monitoring; (O) - Other monitoring as required by EPA

4. Comment and/or Explanation of Any Violations (Reference all attachments here)

F. Certification

Hector M. Avila

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Typed or Printed Name/Title of Principal Executive Officer or Authorized Agent

Email of Principal Executive Officer or Authorized Agent: hector.avila@ales.com

Signature of Principal Executive Officer or Authorized Agent

Date

1/17/15

Instructions for Completing the MSGP Industrial Discharge Monitoring Report (MDMR)

Who Must Submit A Discharge Monitoring Report to EPA?

Facilities covered under the Multi-Sector General Permit (MSGP or permit) that are required to monitor pursuant to Parts 6.2, 6.3, and 8 of the permit must submit the MSGP Discharge Monitoring Report (MDMR) consistent with the reporting requirements specified in Part 7.1 of the permit.

Where to File the MDMR Form

Monitoring data collected pursuant to Parts 6.2, 6.3, and 8 of the permit must be submitted electronically via EPA's Electronic Notice of Intent System (eNOI), which can be found at www.epa.gov/npdes/enoi. Filing electronically will allow permittees to easily submit the results of monitoring data to EPA. If you cannot access eNOI, monitoring results must be reported on the paper MDMR form and sent to one of the following addresses:

Via U.S. mail:

U.S. Environmental Protection Agency
Office of Water, Water Permits Division
Mail Code 4203M, ATTN: MSGP Reports
1200 Pennsylvania Avenue, NW
Washington, D.C. 20460

Via Overnight/Express Delivery:

U.S. Environmental Protection Agency
Office of Water, Water Permits Division
Room 7420, ATTN: MSGP Reports
1201 Constitution Avenue, NW
Washington, D.C. 20004
Phone number: 202-564-9545

Completing the MDMR Form

To complete this form, type or print in uppercase letters in the appropriate areas only. Be sure that you complete all applicable questions. Photocopy your MDMR form for your records before you send the completed original form to the appropriate address above. Use ink when you sign and mail the original document – EPA will not accept photocopies. You may also use this paper form as a checklist for the information you will need when submitting a MDMR electronically via EPA's eNOI system.

Reasons for Submission

Indicate your reason(s) for submitting this MDMR by checking all boxes that apply. The reasons for submission are defined as follows:

- **Submitting monitoring data:** For each storm sampled, submit one MDMR form with data for all outfalls sampled. Select this reason even if you only have monitoring data for some of your outfalls (i.e., some outfalls did not discharge). If you select this reason you are required to complete all Sections of the form.
- **Reporting no discharge for all outfalls for this monitoring period:** Indicates that there were no discharges from all outfalls during this monitoring period. If you select this reason you are only required to complete Sections A, B, C.1, D, and F.
- **Reporting that your site status has changed to inactive and unstaffed:** Indicates that your facility is currently inactive and unstaffed (See Part 6.2.1.3 of the permit for more information). If you select this reason you are only required to complete Sections A, B, and F and include date of status change in the comment field in Section E.4.
- **Reporting that you site status has changed from inactive to active:** Indicates that your facility is currently active (See Part 6.2.1.3 of the permit for more information). If you select this reason you are required to complete all Sections of the form and include date of status change in the comment field in Section E.4.
- **Reporting that no further reductions are achievable for all outfalls and for all pollutants via Part 6.2.1.2 of the permit:** Indicates that your facility has determined that no further pollutant reductions are technologically and economically practicable in light of best industry practice to meet the technology-based effluent limits or are necessary to meet the water-quality-based effluent limitations in Parts 2 of the permit (See Part 6.2.1.2 of the permit for more information). If you select this reason you are required to complete Sections A, B and F. However, if you can make this finding for some outfalls and pollutants, but not for others, you cannot select this reason; you will instead be able to identify which outfalls and which pollutants you can make this finding for in Section E.

Section A. Permit Tracking Number

Enter the National Pollutant Discharge Elimination System (NPDES) tracking number assigned by EPA's Stormwater Notice Processing Center to the facility. If you do not know the tracking number, you can find the tracking number assigned to your facility on EPA's Notice of Intent (NOI) Search website (www.epa.gov/npdes/noisearch).

Section B. Facility Information

1. Enter the facility's official or legal name. Unless the name of your facility has changed, please use the same name provided on your NOI. You can use EPA's NOI Search website (www.epa.gov/npdes/noisearch) to view your NOI.
- 2.a-d. Enter the street address, including city, state, and zip code of the actual physical location of the facility. Do not use a P.O. Box.
3. (Optional) Identify the name, telephone number, and email address of the person who will serve as a contact for EPA on issues related to monitoring at your facility. This person should be able to answer questions related to stormwater discharges and monitoring or have immediate access to individuals with that knowledge. This person does not have to be the facility operator, but should have intimate knowledge of monitoring activities at the facility.
4. If the form was prepared by someone other than the person who is signing the certification statement in Section F (for example, if the MDMR was prepared by a member of the facility's stormwater pollution prevention team or a consultant for the certifier's signature), include the name, organization, phone number and email address of the MDMR preparer.

Section C. Discharge Information

1. Indicate the appropriate monitoring period (Quarter 1, 2, 3, or 4) covered by the MDMR. "Alternative" monitoring periods can apply to facilities located in arid and semi-arid climates, or in areas subject to snow or prolonged freezing. To use alternative monitoring periods, you must provide a revised monitoring schedule here in the first monitoring report submitted and indicate for which alternative monitoring period you are reporting monitoring data. If using alternative monitoring periods, identify the first day of the monitoring period through the last day of the monitoring period for each of the four periods. The dates should be displayed as month (Mo) / day (Day). See Parts 6.1.6 and 6.1.7 of the permit for more information.
2. If you are submitting benchmark monitoring data, identify if your facility is required to collect benchmark samples for one or more hardness-dependent metals (i.e., cadmium, copper, lead, nickel, silver, and zinc). If you select "yes" to this question you must also complete Question 2.a. and if you select "no" to this question you may skip to Section D.
- 2.a. If you selected "yes" for Question 2 under Section C, then you are required to submit to EPA with your first benchmark report a hardness level, established consistent with the procedures in Appendix J of the permit, which is representative of your receiving water. If your outfalls discharge to more than one receiving water, as reported in your NOI form, you should report hardness for the receiving water with the lowest hardness values. Hardness values must be reported in milligrams per liter (mg/L).

Section D. Outfall Information

1. Enter the total number of outfalls identified in your stormwater pollution prevention plan (SWPPP). Outfalls are locations where stormwater exits the facility, including pipes, ditches, swales, and other structures used to remove stormwater from the facility.
2. Indicate if your facility has two or more outfalls that you believe discharge substantially identical effluents (i.e., stormwater), based on the similarities of the general industrial activities and control measures, exposed materials that may significantly contribute pollutants to stormwater, and runoff coefficients of their drainage areas. See Parts 5.1.5.2 and 6.1.1 of the permit for more information on substantially identical outfalls.
- 2.a. If you selected "yes" for Question 2 under Section D, then you must list the outfall name(s) in Column 3.B. that you expect to be substantially identical to the corresponding outfall in Column 3.A.
- 3.A. **Monitored Outfall Name:** List name(s) of outfall(s) you are required to monitor in Column 3.A.
- 3.B. **Substantially Identical Outfalls:** List name(s) of outfall(s) substantially identical to "Monitored Outfall" in Column 3.A. (if applicable).
- 3.C. **No Discharge:** Check box if you are reporting "No Discharge" for the monitored outfall for the reporting period identified in Section C.1.

Example:

3.A Monitored Outfall Name	3.B. Substantially Identical Outfall	3.C. No Discharge
Outfall A	Outfall B; Outfall C	<input type="checkbox"/>
Outfall D		<input checked="" type="checkbox"/>

Reference attachment if additional space is needed to complete the Table Section D.

Section E. Monitoring Information

1. Enter the NPDES tracking number assigned by EPA's Stormwater Notice Processing Center to the facility reported in Section A.
2. For the reported monitoring event indicate whether the discharge was from a rainfall or snowmelt event. If you select "rainfall" then indicate the duration (in hours) of the rainfall event, rainfall total (in inches) for that rainfall event, and time (in days) since the previous measurable storm event in line items 2.a-c. For both rainfall and snowmelt monitoring, you must identify the date of collection for the monitoring event in column 3.g. of the table. If the discharge occurs during a period of both rainfall and snowmelt, check both the rainfall and snowmelt boxes and report the appropriate rainfall information in item 2.a-c. To report multiple monitoring events in the same reporting period, copy Page 2 of this Form and enter each monitoring event separately with data for all outfalls sampled.

For each pollutant monitored at an outfall, you must complete one row in the Table as follows:

- 3.a. **Outfall Name:** Provide the outfall name for which you monitored (e.g., Outfall 1, Outfall 2, Outfall 3).
- 3.b. **Monitoring Type:** Provide the type of monitoring using the specified codes, in parentheses, below:
 - (QBM) – Quarterly benchmark monitoring
 - (ELG) – Annual effluent limitations guidelines monitoring;
 - (S/T) – State- or Tribal-specific monitoring;
 - (I) – Impaired waters monitoring; or
 - (O) – Other monitoring as required by EPA.
- 3.c. **Parameter(s):** Enter each "Parameter" (or "pollutant") monitored. For QBM and ELG monitoring, use the same parameter name as in Part 8 of the permit.
- 3.d. **Quality or Concentration:** Enter sample measurement value for each parameter analyzed and required to be reported. Enter "ND" (i.e., not detected) for any sample results below the method detection limit or "BQL" (i.e., below quantitation limit) for sample results above the detection limit but below the quantitation limit.
- 3.e. **Units:** Enter the units for sample measurement values (i.e., "mg/L" for milligrams per liter) for each parameter analyzed and required to be reported. For monitoring results reported as ND or BQL this space will be left blank and the units will be reported in Column 3.f.
- 3.f. **Results Description:** This section must be completed for any monitoring results reported as ND or BQL in the "Quality or Concentration" column. For ND, report the laboratory detection level and units in this column. For BQL, report the laboratory quantitation limit and units in this column.
- 3.g. **Collection Date:** Identify the sampling date for each parameter monitoring result reported on this form.
- 3.h. **Exceedance due to natural background pollutant levels:** Check box if following the first 4 quarters of benchmark monitoring (or sooner if the exceedance is triggered by less than 4 quarters of data) you have determined that the exceedance of the benchmark is attributable solely to the presence of that pollutant in the natural background for that outfall and any substantially identical outfalls. See Part 6.2.4.2 of the permit for more information. Attach supporting rationale for your determination to the submitted MDMR and reference attachment in Section E.4.
- 3.i. **No further pollutant reductions achievable:** Check box if after collection of 4 quarterly samples (or sooner if the exceedance is triggered by less than 4 quarters of data), the average of the 4 monitoring values for any parameter exceeds the benchmark and you have made the determination that no further pollutant reductions are technologically available and economically practicable and achievable in light of best industry practice to meet the technology-based

effluent limits or are necessary to meet the water-quality-based effluent limitations in Parts 2 of the permit (See Part 6.2.1. of the permit for more information) for that outfall and any substantially identical outfalls. Attach supporting rationale for your determination to the submitted MDMR and reference attachment in Section E.4.

4. Where violations of the permit requirements are reported, include a brief explanation to describe the cause and corrective actions taken, and reference each violation by date. Also, this section should include any additional comments such as are required when changing site status from inactive and unstaffed to active or vice versa. Attach additional pages if you need more space.

Attach additional copies of Section E as necessary to address all outfalls and parameters.

Section F. Certification

Enter "Name/Title of Principal Executive Officer or Authorized Agent" with "Signature of Principal Executive Officer or Authorized Agent," "Date" form was signed and email of the "Principal Executive Officer or Authorized Agent." If you submit multiple pages of Section E monitoring data, each page must be appropriately signed and certified as described below.

Certification statement and signature (see Section B.11 in Appendix B of the permit for more information). Federal statutes provide for severe penalties for submitting false information on this reporting form. Federal regulations require this form to be signed by one of the following individuals, or a duly authorized representative of that person, as follows:

For a corporation: by a responsible corporate officer, which means:

- (i) president, secretary, treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy or decision making functions for the corporation, or
- (ii) the manager of one or more manufacturing, production, or operating facilities, provided the manager is authorized to make management decisions which govern the operation of the regulated facility including having the explicit or implicit duty of making major capital investment recommendations, and initiating and directing other comprehensive measures to assure long term environmental compliance with environmental laws and regulations; the manager can ensure that the necessary systems are established or actions taken to gather complete and accurate information for permit application requirements; and where authority to sign documents has been assigned or delegated to the manager in accordance with corporate procedures;

For a partnership or sole proprietorship: by a general partner or the proprietor; or
For a municipal, State, Federal, or other public facility: by either a principal executive or ranking elected official.

Paperwork Reduction Act Notice

Public reporting burden for this certification is estimated to average 7.25 hours per response plus an additional 2 hours for respondents required to gather hardness data, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding the burden estimate, any other aspect of the collection of information, or suggestions for improving this form, including any suggestions which may increase or reduce this burden to: Director, Office of Environmental Information Services, Collection Services Division (2823), USEPA, 1200 Pennsylvania Avenue, NW, Washington, DC 20460. Include the OMB control number of this form on any correspondence. Do not send the completed MDMR form to this address.



BECKTON ENVIRONMENTAL
LABORATORIES, INC.



REPORT OF ANALYSIS

ATTENTION: Mr. Héctor Ávila
COMPANY: AES Puerto Rico - Guayama

DATE: August 7, 2014

CONTRACT: AES - Guayama

LAB. SAMPLE ID: BEL-1403266
SAMPLE COLLECTED BY: Client (H. Ávila)
DATE RECEIVED: 07/24/14

SAMPLE DATE: 07/18/14
TIME: 7:45

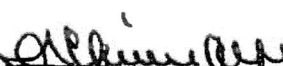
DESCRIPTION: 002
LAB. FILE ID: 1403266
MATRIX: Water

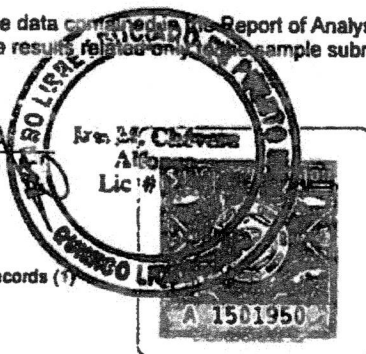
PARAMETER	EPA METHOD	SAMPLE TYPE	UNITS	BEL-1403266 RESULT	METHOD DETECTION LIMIT	ANALYST	DATE ANALYZED
Hardness, Total	SM 2340 C*	Grab	mg/L	160	3.50	HM	08/05/14
Aluminum	200.7(ICAP)	Grab	mg/L	0.313	0.010	BTR	07/30/14
Iron	200.7(ICAP)	Grab	mg/L	0.102	0.010	BTR	07/30/14
Lead	200.7(ICAP)	Grab	mg/L	<0.001	0.001	BTR	07/30/14
Zinc	200.7(ICAP)	Grab	mg/L	0.016	0.001	BTR	07/30/14

*Standard Methods for the Examination of Water and Waste Water, 19th Edition, 1995.

Method Detection Limit (MDL)-The minimum concentration of a substance that can be measured and reported with 99% confidence that the value is above zero.

Certification and release of the data contained in this Report of Analysis has been authorized by the Laboratory Manager or the Manager's Designee. Sample results related only to the sample submitted.


Lcda Iris M. Chévere Alfonso
Laboratory Director
Chemist License 2370



Attachment Chain of Custody Records (1)

PAGE 1 OF 1

THE NELAC CERTIFIED ANALYSES MEET ALL REQUIREMENTS OF NELAC STANDARDS.
REFER OUR SERVICE DEPARTMENT FOR THE CURRENT LIST OF CERTIFIED ANALYSES.
CERTIFIED BY THE STATE OF FLORIDA DEPARTMENT OF HEALTH AND REHABILITATION SERVICES FOR ENVIRONMENTAL TESTING
• CERTIFICATION NUMBER E87558 •
192 VILLA STREET • PONCE, PR 00730-4875 • TEL. (787) 841-7373 • FAX (787) 841-7313

BECKTON ENVIRONMENTAL LABORATORIES

192 Villa Street • Ponce, P.R. 00730-4875

Tel 787-841-7373 • Fax 787-841-7313

REVISION 2009

CHAIN OF CUSTODY RECORD

PROJECT NO	COMPANY AES Guayama	SAMPLER H. Avila
SAMPLE LOCATION CLIENT ID	002	TIME 7:45 AM
SAMPLE DATE	7-18-14	BEL NO. 1403266
		CONTROL NO. 177827

1 General Environmental	PC	VSS	PC
Acidity ()	—	Alkalinity ()	—
Ammonia as N ()	—	Bicarbonate ()	—
BOD-5 ()	—	Bromide ()	—
Chloride ()	—	Chlorine, Res. ()	—
COD ()	—	Color (ADMI) ()	—
Conductivity μ mhos/cm ()	—	Color (Pt-Co) ()	—
Dissolved Oxygen ()	—	Cyanide ()	—
Hardness (X) 1.2	—	Fluoride ()	—
Moisture % ()	—	Iodide ()	—
Nitrite ()	—	Nitrate ()	—
Oil+Grease ()	—	Nitrate + Nitrite ()	—
Phenol ()	—	pH, S.U. ()	—
Phosphorus, Total ()	—	Phosphate, Ortho ()	—
Sett Solids mg/L ()	—	Sett Solids mL/L ()	—
Sulfate ()	—	Solids, Total ()	—
Sulfite ()	—	Sulfide ()	—
TDS ()	—	Surfactant ()	—
Temperature, °C ()	—	TSS ()	—
TOC ()	—	TKN ()	—
Asbestos ()	—	Turbidity ()	—
TVS ()	—	Carbonate ()	—
Total Nitrogen ()	—		—
2. Metals:			
Aluminum (Al) (X) 1.3	—	Cadmium (Cd) ()	—
Chromium (Cr) ()	—	Copper (Cu) ()	—
Iron (Fe) (X) 1.2	—	Lead (Pb) (X) 1.3	—
Manganese (Mn) ()	—	Mercury (Hg) ()	—
Nickel (Ni) ()	—	Selenium (Se) ()	—
Silver (Ag) ()	—	Tin (Sn) ()	—
Zinc (Zn) (X) 1.2	—	Arsenic (As) ()	—
Barium (Ba) ()	—	Boron (B) ()	—
Antimony (Sb) ()	—	Beryllium (Be) ()	—
Bismuth (Bi) ()	—	Calcium (Ca) ()	—
Chromium, VI (CrVI) ()	—	Cobalt (Co) ()	—
Magnesium (Mg) ()	—	Molybdenum (Mo) ()	—
Potassium (K) ()	—	Silicon (Si) ()	—
Sodium (Na) ()	—	Strontium (Sr) ()	—
Thallium (Tl) ()	—	Titanium (Ti) ()	—
Vanadium (V) ()	—	Lithium (Li) ()	—
3. RCRA/Hazardous wastes			
Ignitability (Flash Pt.) ()	—	Corrosivity ()	—
Reactivity (CN & S) ()	—	TCLP ()	—
RCRA Metals ()	—	Organics-Pest/Herb ()	—
Organics-BNA ()	—	Organics-VOA ()	—
TOX ()	—		—
4. Specific Organics			
Volatiles ()	—	Phenols GC ()	—
Pesticides/PCB's ()	—	Semi-Volatiles (BNA) ()	—
Herbicides ()	—	PCB's Only ()	—
BTEX ()	—	TPH 418.1 ()	—
TTO & Dioxin ()	—	TTO ()	—
	—	TPH 8015 ()	—
	—	Lindane ()	—
5. Microbiology			
Fecal Coliform ()	—	Total Coliform ()	—

Comments:

Sampling Witness: _____

Date/Time: _____

Relinquished by: _____

Date/Time: **7-21-14 11:20am**

Received by: _____

Date/Time: **7-24-14 11:20am**

Relinquished by: _____

Date/Time: **7-24-14 12:50 pm**

Received by: _____

Date/Time: **7/24/14 12:50pm**

Relinquished by: _____

Date/Time: _____

Received by: _____

Date/Time: _____

Relinquished by: _____

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BECKTON ENVIRONMENTAL
LABORATORIES, INC.



REPORT OF ANALYSIS

ATTENTION: Mr. Héctor Ávila
COMPANY: AES Puerto Rico - Guayama

DATE: August 7, 2014

CONTRACT: AES - Guayama

LAB. SAMPLE ID: BEL-1403267
SAMPLE COLLECTED BY: Client (H. Ávila)
DATE RECEIVED: 07/24/14

SAMPLE DATE: 07/18/14
TIME: 7:55AM

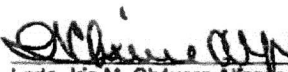
DESCRIPTION: 004
LAB. FILE ID: 1403267
MATRIX: Water

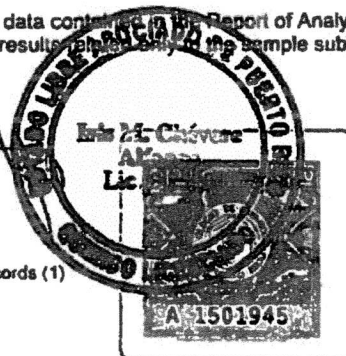
PARAMETER	EPA METHOD	SAMPLE TYPE	UNITS	BEL-1403267 RESULT	METHOD DETECTION LIMIT	ANALYST	DATE ANALYZED
Hardness, Total	SM 2340 C*	Grab	mg/L	44.0	3.50	HM	08/05/14
Aluminum	200.7(ICAP)	Grab	mg/L	0.248	0.010	BTR	07/30/14
Iron	200.7(ICAP)	Grab	mg/L	0.134	0.010	BTR	07/30/14
Lead	200.7(ICAP)	Grab	mg/L	<0.001	0.001	BTR	07/30/14
Zinc	200.7(ICAP)	Grab	mg/L	0.025	0.001	BTR	07/30/14

*Standard Methods for the Examination of Water and Waste Water, 19th Edition, 1995.

Method Detection Limit (MDL)-The minimum concentration of a substance that can be measured and reported with 99% confidence that the value is above zero.

Certification and release of the data contained in this Report of Analysis has been authorized by the Laboratory Manager or the Manager's Designee. Sample results apply only to the sample submitted.


Lcda Iris M Chévere Alfonso
Laboratory Director
Chemist License 2370



Attachment Chain of Custody Records (1)

PAGE 1 OF 1

THE NELAC CERTIFIED ANALYSES MEET ALL REQUIREMENTS OF NELAC STANDARDS.
REFER OUR SERVICE DEPARTMENT FOR THE CURRENT LIST OF CERTIFIED ANALYSES.
CERTIFIED BY THE STATE OF FLORIDA DEPARTMENT OF HEALTH AND REHABILITATION SERVICES FOR ENVIRONMENTAL TESTING
• CERTIFICATION NUMBER E87556 •
192 VILLA STREET • PONCE, PR 00730-4875 • TEL. (787) 841-7373 • FAX (787) 841-7313

BECKTON ENVIRONMENTAL LABORATORIES

192 Villa Street • Ponce, P.R. 00730-4875

Tel 787-841-7373 • Fax 787-841-7313

REVISION 2009

CHAIN OF CUSTODY RECORD

PROJECT NO	COMPANY	SAMPLER
	AES Guayama	H. Ariza
SAMPLE LOCATION/CLIENT ID	004	TIME
SAMPLE DATE	7-18-14	7:55 AM
		BEL. NO.
		1403267
		CONTROL NO.
		177829

1 General Environmental

Acidity ()	PC	VSS ()	PC
Ammonia as N ()		Allalinity ()	
BOD-5 ()		Bicarbonate ()	
Chloride ()		Bromide ()	
COD ()		Chlorine, Res ()	
Conductivity μ mhos/cm ()		Color (ADMI) ()	
Dissolved Oxygen ()		Color (Pt-Co) ()	
Hardness ()		Cyanide ()	
Moisture % ()	12	Fluoride ()	
Nitrite ()		Iodide ()	
Oil+Grease ()		Nitrate ()	
Phenol ()		Nitrate + Nitrite ()	
Phosphorus, Total ()		pH, S.U. ()	
Sett Solids mg/L ()		Phosphate, Ortho ()	
Sulfate ()		Sett Solids mL/L ()	
Sulfite ()		Solids, Total ()	
TDS ()		Sulfide ()	
Temperature, °C ()		Surfactant ()	
TOC ()		TSS ()	
Asbestos ()		TKN ()	
TVS ()		Turbidity ()	
Total Nitrogen ()		Carbonate ()	

2. Metals:

Aluminum (Al) ()	12	Cadmium (Cd) ()	
Chromium (Cr) ()		Copper (Cu) ()	
Iron (Fe) ()	13	Lead (Pb) ()	13
Manganese (Mn) ()		Mercury (Hg) ()	
Nickel (Ni) ()		Selenium (Se) ()	
Silver (Ag) ()		Tin (Sn) ()	
Zinc (Zn) ()	12	Arsenic (As) ()	
Barium (Ba) ()		Boron (B) ()	
Antimony (Sb) ()		Beryllium (Be) ()	
Bismuth (Bi) ()		Calcium (Ca) ()	
Chromium, VI (CrVI) ()		Cobalt (Co) ()	
Magnesium (Mg) ()		Molybdenum (Mo) ()	
Potassium (K) ()		Silicon (Si) ()	
Sodium (Na) ()		Strontium (Sr) ()	
Thallium (Tl) ()		Titanium (Ti) ()	
Vanadium (V) ()		Lithium (Li) ()	

3. RCRA/Hazardous wastes

Ignitability (Flash Pt.) ()		Corrosivity ()	
Reactivity (CN & S) ()		TCLP ()	
RCRA Metals ()		Organics-Pest/Herb ()	
Organics-BNA ()		Organics-VOA ()	
TOX ()			

4. Specific Organics

Volatiles ()		Phenols GC ()	
Pesticides/PCB's ()		Semi-Volatiles (BNA) ()	
Herbicides ()		PCB's Only ()	
BTEX ()		TPH 418.1 ()	
TTO & Dioxin ()		TTO ()	
		TPH 8015 ()	
		Lundane ()	

5. Microbiology

Fecal Coliform ()		Total Coliform ()	
--------------------	--	--------------------	--

Comments:

Sampling Witness:

Date/Time:

Relinquished by:

Date/Time:

Received by:

Date/Time:

Relinquished by:

Date/Time:

Received by:

Date/Time:

Relinquished by:

Date/Time:

Received by:

Date/Time:

Matrix

air ()	water (X)	sludge ()
liquid ()	soil ()	solid ()
oil ()	mixed ()	other ()

Specify:

Preservative Codes = PC

- | | |
|---|----------------------------|
| 1. Cool, <6°C | 6. Sodium Hydroxide (NaOH) |
| 2. Sulfuric Acid (H ₂ SO ₄) pH<2 | 7. Zinc Acetate |
| 3. Nitric Acid (HNO ₃) pH<2 | 8. Ascorbic Acid |
| 4. Hydrochloric acid (HCl) | 9. FAS |
| 5. Sodium Thiosulfate | 10. Other |

Sample type legend:

grab samples	x
composite samples	xx

Turnaround time: Sampling Equipment:

1 day ()	Automatic Sampler ()
2 days ()	Sample Pick Up ()
3 days ()	
5 days ()	

Note: normal turnaround time is ten (10) working days;
additional charges apply for rush orders.

Original



BECKTON ENVIRONMENTAL
LABORATORIES, INC.



REPORT OF ANALYSIS

ATTENTION: Mr. Héctor Ávila
COMPANY: AES Puerto Rico - Guayama

DATE: August 7, 2014

CONTRACT: AES - Guayama

LAB. SAMPLE ID: BEL-1403268
SAMPLE COLLECTED BY: Client (H. Ávila)
DATE RECEIVED: 07/24/14

SAMPLE DATE: 07/18/14
TIME: 8:10AM

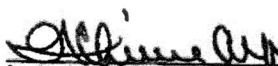
DESCRIPTION: 003
LAB. FILE ID: 1403268
MATRIX: Water

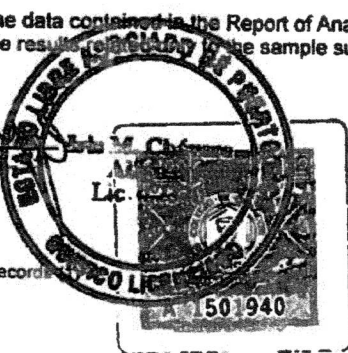
PARAMETER	EPA METHOD	SAMPLE TYPE	UNITS	BEL-1403268 RESULT	METHOD DETECTION LIMIT	ANALYST	DATE ANALYZED
Hardness Total	SM 2340 C-	Grab	mg/L	368.	3.50	HM	08/05/14
Aluminum	200.7(ICAP)	Grab	mg/L	0.134	0.010	BTR	07/30/14
Iron	200.7(ICAP)	Grab	mg/L	0.119	0.010	BTR	07/30/14
Lead	200.7(ICAP)	Grab	mg/L	0.004	0.001	HS	07/31/14
Zinc	200.7(ICAP)	Grab	mg/L	0.005	0.001	BTR	07/30/14

*Standard Methods for the Examination of Water and Waste Water, 19th Edition, 1995.

Method Detection Limit (MDL)-The minimum concentration of a substance that can be measured and reported with 99% confidence that the value is above zero.

Certification and release of the data contained in the Report of Analysis has been authorized by the Laboratory Manager or the Manager's Designee. Sample results released on the sample submitted


Lcda. Iris M. Chévere Alfonzo
Laboratory Director
Chemist License 2370



Attachment Chain of Custody Record

PAGE 1 OF 1

THE NELAC CERTIFIED ANALYSES MEET ALL REQUIREMENTS OF NELAC STANDARDS.
REFER OUR SERVICE DEPARTMENT FOR THE CURRENT LIST OF CERTIFIED ANALYSES.
CERTIFIED BY THE STATE OF FLORIDA DEPARTMENT OF HEALTH AND REHABILITATION SERVICES FOR ENVIRONMENTAL TESTING
• CERTIFICATION NUMBER E87556 •
192 VILLA STREET • PONCE, PR 00730-4875 • TEL. (787) 841-7373 • FAX (787) 841-7313

Original



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
WASHINGTON, DC 20460
MSGP INDUSTRIAL DISCHARGE MONITORING REPORT (MDMR)

Form Approved.
OMB No. 2040-0004

Reason(s) for Submission (Check all that apply):

- ☒ Submitting monitoring data (Fill in all Sections).
☐ Reporting no discharge for all outfalls for this monitoring period (Fill in Sections A, B, C.1, D, and F).
☐ Reporting that your site status has changed to inactive and unstaffed (Fill in Sections A, B, F and include date of status change in comment field in Section E.4).
☐ Reporting that your site status has changed to active (Fill in all Sections and include date of status change in comment field in Section E.4).
☐ Reporting that no further pollutant reductions are achievable for all outfalls and for all pollutants via Part 6.2.1.2 of the MSGP (Fill in Sections A, B and F).

A. Permit Tracking Number: **PRR05BL65**

Note: Read instructions before completing this Form.

B. Facility Information

1. Facility Name: **AES PUERTO RICO**

2. Facility Location:

a. Street: **PR-03 KM 14.2 .0 BO. JOBOS**

b. City: **GUAYAMA**

c. State: **PR** d. Zip Code: **00785**

3. Additional Facility Information (Optional):

Contact Name: **RON RODRIQUE**

Email: **ron.rodrigue@aes.com**

Phone: **787-866-8117** Ext. **2219**

4. MDMR Preparer (Complete if MDMR was prepared by someone other than the person signing the certification in Section F)

Prepared by: **HECTOR M AVILA**

Organization: **AES PUERTO RICO**

Email: **hector.avila@aes.com**

Phone: **787-866-8117** Ext. **2266**

C. Discharge Information

1. Identify monitoring period:

☒ Check here if proposing alternative monitoring periods due to irregular stormwater runoff. Identify alternative monitoring schedule and indicate for which alternative monitoring period you are reporting monitoring data:

☐ Quarter 1 (April 1 – June 30)

☐ Quarter 1: From **01/01** To **03/31**

☐ Quarter 2 (July 1 – September 30)

☐ Quarter 2: From **04/01** To **06/30**

☐ Quarter 3 (October 1 – December 31)

☐ Quarter 3: From **07/01** To **09/30**

☐ Quarter 4 (January 1 – March 31)

☒ Quarter 4: From **10/01** To **12/31**

2. Are you required to monitor for cadmium, copper, chromium, lead, nickel, silver, or zinc? ☒ Yes (Complete line item 2.a.) ☐ No (Skip to Section D)

2.a. What is the hardness level of the receiving water? **6800** mg/L

D. Outfall Information

1. How many outfall(s) are identified in your SWPPP? **03** List name of outfall(s) required to be monitored in table below.

2. Do any of your outfalls discharge substantially identical effluents? ☐ YES ☒ NO

2.a. If yes, for each monitored outfall, indicate outfall names that are substantially identical in table below.

3.A. Monitored Outfall Name*	3.B. Substantially Identical Outfalls [List name(s) of outfall(s) substantially identical to outfall in 3.A. (if applicable)]	3.C. No Discharge?
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

*Reference attachment if additional space needed to complete the table.



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
WASHINGTON, DC 20460
MSGP INDUSTRIAL DISCHARGE MONITORING REPORT (MDMR)

Form Approved. OMB No. 2040-0004

E. Monitoring Information

Note: Make additional copies of this form as necessary.

1. Permit Tracking Number: **PRR05BL65**

2. Nature of Discharge: ☒ Rainfall (Complete line items 2.a., 2.b., & 2.c.) ☐ Snowmelt

2.a. Duration of the rainfall event (hours): **01** 2.b. Rainfall amount (inches): **0.03** 2.c. Time since previous measurable storm event (days): **011**

3.a. Outfall Name	3.b. Monitoring Type (QBM, ELG, S/T, I, O)*	3.c. Parameter	3.d. Quality or Concentration	3.e. Units	3.f. Results Description	3.g. Collection Date	3.h. Exceedance due to natural background pollutant levels	3.i. No further pollutant reductions achievable?
002	QMB	Aluminum	0.364	mg/L		12/05/14	<input type="checkbox"/>	<input type="checkbox"/>
002	QMB	Iron	0.063	mg/L		12/05/14	<input type="checkbox"/>	<input type="checkbox"/>
002	QMB	Lead	ND	mg/L	0.001	12/05/14	<input type="checkbox"/>	<input type="checkbox"/>
002	QMB	Zinc	0.026	mg/L		12/05/14	<input type="checkbox"/>	<input type="checkbox"/>
001	QMB	Aluminum	0.240	mg/L		12/05/14	<input type="checkbox"/>	<input type="checkbox"/>
001	QMB	Iron	0.244	mg/L		12/05/14	<input type="checkbox"/>	<input type="checkbox"/>
001	QMB	Lead	ND	mg/L	0.001	12/05/14	<input type="checkbox"/>	<input type="checkbox"/>
001	QMB	Zinc	0.016	mg/L		12/05/14	<input type="checkbox"/>	<input type="checkbox"/>
003	QMB	Aluminum	0.124	mg/L		12/16/14	<input type="checkbox"/>	<input type="checkbox"/>
003	QMB	Iron	0.055	mg/L		12/16/14	<input type="checkbox"/>	<input type="checkbox"/>
003	QMB	Lead	0.006	mg/L		12/16/14	<input type="checkbox"/>	<input type="checkbox"/>
003	QMB	Zinc	0.001	mg/L		12/16/14	<input type="checkbox"/>	<input type="checkbox"/>

* (QBM) - Quarterly benchmark monitoring; (ELG) - Annual effluent limitations guidelines monitoring; (S/T) - State- or Tribal-specific monitoring; (I) - Impaired waters monitoring; (O) - Other monitoring as required by EPA

4. Comment and/or Explanation of Any Violations (Reference all attachments here)

F. Certification

Hector M. Avila

Typed or Printed Name/Title of Principal Executive
Officer or Authorized Agent

Email of Principal Executive Officer or Authorized Agent:

hector.m.avila@epa.gov

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature of Principal Executive Officer or Authorized Agent

Date

1/17/15

Instructions for Completing the MSGP Industrial Discharge Monitoring Report (MDMR)

Who Must Submit A Discharge Monitoring Report to EPA?

Facilities covered under the Multi-Sector General Permit (MSGP or permit) that are required to monitor pursuant to Parts 6.2, 6.3, and 8 of the permit must submit the MSGP Discharge Monitoring Report (MDMR) consistent with the reporting requirements specified in Part 7.1 of the permit.

Where to File the MDMR Form

Monitoring data collected pursuant to Parts 6.2, 6.3, and 8 of the permit must be submitted electronically via EPA's Electronic Notice of Intent System (eNOI), which can be found at www.epa.gov/npdes/enoi. Filing electronically will allow permittees to easily submit the results of monitoring data to EPA. If you cannot access eNOI, monitoring results must be reported on the paper MDMR form and sent to one of the following addresses:

Via U.S. mail:

U.S. Environmental Protection Agency
Office of Water, Water Permits Division
Mail Code 4203M, ATTN: MSGP Reports
1200 Pennsylvania Avenue, NW
Washington, D.C. 20460

Via Overnight/Express Delivery:

U.S. Environmental Protection Agency
Office of Water, Water Permits Division
Room 7420, ATTN: MSGP Reports
1201 Constitution Avenue, NW
Washington, D.C. 20004
Phone number: 202-564-9545

Completing the MDMR Form

To complete this form, type or print in uppercase letters in the appropriate areas only. Be sure that you complete all applicable questions. Photocopy your MDMR form for your records before you send the completed original form to the appropriate address above. Use ink when you sign and mail the original document – EPA will not accept photocopies. You may also use this paper form as a checklist for the information you will need when submitting a MDMR electronically via EPA's eNOI system.

Reasons for Submission

Indicate your reason(s) for submitting this MDMR by checking all boxes that apply. The reasons for submission are defined as follows:

- **Submitting monitoring data:** For each storm sampled, submit one MDMR form with data for all outfalls sampled. Select this reason even if you only have monitoring data for some of your outfalls (i.e., some outfalls did not discharge). If you select this reason you are required to complete all Sections of the form.
- **Reporting no discharge for all outfalls for this monitoring period:** Indicates that there were no discharges from all outfalls during this monitoring period. If you select this reason you are only required to complete Sections A, B, C.1, D, and F.
- **Reporting that your site status has changed to inactive and unstaffed:** Indicates that your facility is currently inactive and unstaffed (See Part 6.2.1.3 of the permit for more information). If you select this reason you are only required to complete Sections A, B, and F and include date of status change in the comment field in Section E.4.
- **Reporting that your site status has changed from inactive to active:** Indicates that your facility is currently active (See Part 6.2.1.3 of the permit for more information). If you select this reason you are required to complete all Sections of the form and include date of status change in the comment field in Section E.4.
- **Reporting that no further reductions are achievable for all outfalls and for all pollutants via Part 6.2.1.2 of the permit:** Indicates that your facility has determined that no further pollutant reductions are technologically and economically practicable in light of best industry practice to meet the technology-based effluent limits or are necessary to meet the water-quality-based effluent limitations in Parts 2 of the permit (See Part 6.2.1.2 of the permit for more information). If you select this reason you are required to complete Sections A, B and F. However, if you can make this finding for some outfalls and pollutants, but not for others, you cannot select this reason; you will instead be able to identify which outfalls and which pollutants you can make this finding for in Section E.

Section A. Permit Tracking Number

Enter the National Pollutant Discharge Elimination System (NPDES) tracking number assigned by EPA's Stormwater Notice Processing Center to the facility. If you do not know the tracking number, you can find the tracking number assigned to your facility on EPA's Notice of Intent (NOI) Search website (www.epa.gov/npdes/noisearch).

Section B. Facility Information

1. Enter the facility's official or legal name. Unless the name of your facility has changed, please use the same name provided on your NOI. You can use EPA's NOI Search website (www.epa.gov/npdes/noisearch) to view your NOI.
- 2.a-d. Enter the street address, including city, state, and zip code of the actual physical location of the facility. Do not use a P.O. Box.
3. (Optional) Identify the name, telephone number, and email address of the person who will serve as a contact for EPA on issues related to monitoring at your facility. This person should be able to answer questions related to stormwater discharges and monitoring or have immediate access to individuals with that knowledge. This person does not have to be the facility operator, but should have intimate knowledge of monitoring activities at the facility.
4. If the form was prepared by someone other than the person who is signing the certification statement in Section F (for example, if the MDMR was prepared by a member of the facility's stormwater pollution prevention team or a consultant for the certifier's signature), include the name, organization, phone number and email address of the MDMR preparer.

Section C. Discharge Information

1. Indicate the appropriate monitoring period (Quarter 1, 2, 3, or 4) covered by the MDMR. "Alternative" monitoring periods can apply to facilities located in arid and semi-arid climates, or in areas subject to snow or prolonged freezing. To use alternative monitoring periods, you must provide a revised monitoring schedule here in the first monitoring report submitted and indicate for which alternative monitoring period you are reporting monitoring data. If using alternative monitoring periods, identify the first day of the monitoring period through the last day of the monitoring period for each of the four periods. The dates should be displayed as month (Mo) / day (Day). See Parts 6.1.6 and 6.1.7 of the permit for more information.
2. If you are submitting benchmark monitoring data, identify if your facility is required to collect benchmark samples for one or more hardness-dependent metals (i.e., cadmium, copper, lead, nickel, silver, and zinc). If you select "yes" to this question you must also complete Question 2.a. and if you select "no" to this question you may skip to Section D.
- 2.a. If you selected "yes" for Question 2 under Section C, then you are required to submit to EPA with your first benchmark report a hardness level, established consistent with the procedures in Appendix J of the permit, which is representative of your receiving water. If your outfalls discharge to more than one receiving water, as reported in your NOI form, you should report hardness for the receiving water with the lowest hardness values. Hardness values must be reported in milligrams per liter (mg/L).

Section D. Outfall Information

1. Enter the total number of outfalls identified in your stormwater pollution prevention plan (SWPPP). Outfalls are locations where stormwater exits the facility, including pipes, ditches, swales, and other structures used to remove stormwater from the facility.
2. Indicate if your facility has two or more outfalls that you believe discharge substantially identical effluents (i.e., stormwater), based on the similarities of the general industrial activities and control measures, exposed materials that may significantly contribute pollutants to stormwater, and runoff coefficients of their drainage areas. See Parts 5.1.5.2 and 6.1.1 of the permit for more information on substantially identical outfalls.
- 2.a. If you selected "yes" for Question 2 under Section D, then you must list the outfall name(s) in Column 3.B. that you expect to be substantially identical to the corresponding outfall in Column 3.A.
- 3.A. **Monitored Outfall Name:** List name(s) of outfall(s) you are required to monitor in Column 3.A.
- 3.B. **Substantially Identical Outfalls:** List name(s) of outfall(s) substantially identical to "Monitored Outfall" in Column 3.A. (if applicable).
- 3.C. **No Discharge:** Check box if you are reporting "No Discharge" for the monitored outfall for the reporting period identified in Section C.1.

Example:

3.A Monitored Outfall Name	3.B. Substantially Identical Outfall	3.C. No Discharge
Outfall A	Outfall B; Outfall C	<input type="checkbox"/>
Outfall D		<input checked="" type="checkbox"/>

Reference attachment if additional space is needed to complete the Table Section D.

Section E. Monitoring Information

1. Enter the NPDES tracking number assigned by EPA's Stormwater Notice Processing Center to the facility reported in Section A.
2. For the reported monitoring event indicate whether the discharge was from a rainfall or snowmelt event. If you select "rainfall" then indicate the duration (in hours) of the rainfall event, rainfall total (in inches) for that rainfall event, and time (in days) since the previous measurable storm event in line items 2.a-c. For both rainfall and snowmelt monitoring, you must identify the date of collection for the monitoring event in column 3.g. of the table. If the discharge occurs during a period of both rainfall and snowmelt, check both the rainfall and snowmelt boxes and report the appropriate rainfall information in item 2.a-c. To report multiple monitoring events in the same reporting period, copy Page 2 of this Form and enter each monitoring event separately with data for all outfalls sampled.

For each pollutant monitored at an outfall, you must complete one row in the Table as follows:

- a. **Outfall Name:** Provide the outfall name for which you monitored (e.g., Outfall 1, Outfall 2, Outfall 3).
- b. **Monitoring Type:** Provide the type of monitoring using the specified codes, in parentheses, below:
 - (QBM) – Quarterly benchmark monitoring
 - (ELG) – Annual effluent limitations guidelines monitoring;
 - (S/T) – State- or Tribal-specific monitoring;
 - (I) – Impaired waters monitoring; or
 - (O) – Other monitoring as required by EPA.
- c. **Parameter(s):** Enter each "Parameter" (or "pollutant") monitored. For QBM and ELG monitoring, use the same parameter name as in Part 8 of the permit.
- d. **Quality or Concentration:** Enter sample measurement value for each parameter analyzed and required to be reported. Enter "ND" (i.e., not detected) for any sample results below the method detection limit or "BQL" (i.e., below quantitation limit) for sample results above the detection limit but below the quantitation limit.
- e. **Units:** Enter the units for sample measurement values (i.e., "mg/L" for milligrams per liter) for each parameter analyzed and required to be reported. For monitoring results reported as ND or BQL this space will be left blank and the units will be reported in Column 3.f.
- f. **Results Description:** This section must be completed for any monitoring results reported as ND or BQL in the "Quality or Concentration" column. For ND, report the laboratory detection level and units in this column. For BQL, report the laboratory quantitation limit and units in this column.
- g. **Collection Date:** Identify the sampling date for each parameter monitoring result reported on this form.
- h. **Exceedance due to natural background pollutant levels:** Check box if following the first 4 quarters of benchmark monitoring (or sooner if the exceedance is triggered by less than 4 quarters of data) you have determined that the exceedance of the benchmark is attributable solely to the presence of that pollutant in the natural background for that outfall and any substantially identical outfalls. See Part 6.2.4.2 of the permit for more information. Attach supporting rationale for your determination to the submitted MDMR and reference attachment in Section E.4.
- i. **No further pollutant reductions achievable:** Check box if after collection of 4 quarterly samples (or sooner if the exceedance is triggered by less than 4 quarters of data), the average of the 4 monitoring values for any parameter exceeds the benchmark and you have made the determination that no further pollutant reductions are technologically available and economically practicable and achievable in light of best industry practice to meet the technology-based

effluent limits or are necessary to meet the water-quality-based effluent limitations in Parts 2 of the permit (See Part 6.2.1. of the permit for more information) for that outfall and any substantially identical outfalls. Attach supporting rationale for your determination to the submitted MDMR and reference attachment in Section E.4.

4. Where violations of the permit requirements are reported, include a brief explanation to describe the cause and corrective actions taken, and reference each violation by date. Also, this section should include any additional comments such as are required when changing site status from inactive and unstaffed to active or vice versa. Attach additional pages if you need more space.

Attach additional copies of Section E as necessary to address all outfalls and parameters.

Section F. Certification

Enter "Name/Title of Principal Executive Officer or Authorized Agent" with "Signature of Principal Executive Officer or Authorized Agent," "Date" form was signed and email of the "Principal Executive Officer or Authorized Agent." If you submit multiple pages of Section E monitoring data, each page must be appropriately signed and certified as described below.

Certification statement and signature (see Section B.11 in Appendix B of the permit for more information). Federal statutes provide for severe penalties for submitting false information on this reporting form. Federal regulations require this form to be signed by one of the following individuals, or a duly authorized representative of that person, as follows:

For a corporation: by a responsible corporate officer, which means:

- (i) president, secretary, treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy or decision making functions for the corporation, or
- (ii) the manager of one or more manufacturing, production, or operating facilities, provided the manager is authorized to make management decisions which govern the operation of the regulated facility including having the explicit or implicit duty of making major capital investment recommendations, and initiating and directing other comprehensive measures to assure long term environmental compliance with environmental laws and regulations; the manager can ensure that the necessary systems are established or actions taken to gather complete and accurate information for permit application requirements; and where authority to sign documents has been assigned or delegated to the manager in accordance with corporate procedures;

For a partnership or sole proprietorship: by a general partner or the proprietor; or
For a municipal, State, Federal, or other public facility: by either a principal executive or ranking elected official.

Paperwork Reduction Act Notice

Public reporting burden for this certification is estimated to average 7.25 hours per response plus an additional 2 hours for respondents required to gather hardness data, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding the burden estimate, any other aspect of the collection of information, or suggestions for improving this form, including any suggestions which may increase or reduce this burden to: Director, Office of Environmental Information Services, Collection Services Division (2823), USEPA, 1200 Pennsylvania Avenue, NW, Washington, DC 20460. Include the OMB control number of this form on any correspondence. Do not send the completed MDMR form to this address.



BECKTON ENVIRONMENTAL
LABORATORIES, INC.



REPORT OF ANALYSIS

ATTENTION: Mr. Héctor Ávila
COMPANY: AES Puerto Rico - Guayama

DATE: January 20, 2015

CONTRACT: AES - Guayama

LAB. SAMPLE ID: BEL-1405720
SAMPLE COLLECTED BY: Client (H. Ávila)
DATE RECEIVED: 12/18/14

SAMPLE DATE: 12/16/14
TIME: 13:30

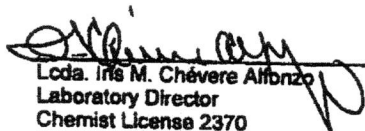
DESCRIPTION: Stormwater 003
LAB. FILE ID: 1405720
MATRIX: Water

PARAMETER	EPA METHOD	SAMPLE TYPE	UNITS	BEL-1405720 RESULT	METHOD DETECTION LIMIT	ANALYST	DATE ANALYZED
TSS	SM 2540 D*	Grab	mg/L	20.0	4.00	NL	12/18/14
Aluminum	200.7(ICAP)	Grab	mg/L	0.124	0.005	HS	01/14/15
Iron	200.7(ICAP)	Grab	mg/L	0.055	0.010	HS	01/12/15
Lead	200.7(ICAP)	Grab	mg/L	0.006	0.001	HS	01/12/15
Zinc	200.7(ICAP)	Grab	mg/L	0.011	0.001	HS	01/12/15

*Standard Methods for the Examination of Water and Waste Water 19th Edition, 1995

Method Detection Limit (MDL)-The minimum concentration of a substance that can be measured and reported with 99% confidence that the value is above zero.

Certification and release of the data contained in the Report of Analysis has been authorized by the Laboratory Manager or the Manager's Designee. Sample results related only to the sample submitted.


Lda. Iris M. Chévere Alfonzo
Laboratory Director
Chemist License 2370

Attachment: Chain of Custody Records (1)



PAGE 1 OF 1

THE NELAC CERTIFIED ANALYSES MEET ALL REQUIREMENTS OF NELAC STANDARDS.
REFER OUR SERVICE DEPARTMENT FOR THE CURRENT LIST OF CERTIFIED ANALYSES.
CERTIFIED BY THE STATE OF FLORIDA DEPARTMENT OF HEALTH AND REHABILITATION SERVICES FOR ENVIRONMENTAL TESTING
• CERTIFICATION NUMBER E87556 •
192 VILLA STREET • PONCE, PR 00730-4875 • TEL. (787) 841-7373 • FAX (787) 841-7313

BECKTON ENVIRONMENTAL LABORATORIES

192 Villa Street • Ponce, P.R. 00730-4875

Tel. 787-841-7373 • Fax 787-841-7313

REVISION 2009

CHAIN OF CUSTODY RECORD

PROJECT NO.	COMPANY	SAMPLER
	AES Guyana	H. Avila / client
SAMPLE LOCATION/CLIENT ID	Storm water 003	TIME
SAMPLE DATE	12-16-14	13:30 AM
		BEL NO. 1405720
		CONTROL NO. 180215

1. General Environmental:	PC	VSS	PC	Sampling Witness:
Acidity ()	—	Alkalinity ()	—	Date/Time:
Ammonia as N ()	—	Bicarbonate ()	—	Relinquished by:
BOD-5 ()	—	Bromide ()	—	X [Signature]
Chloride ()	—	Chlorine, Res ()	—	Date/Time:
COD ()	—	Color (ADMI) ()	—	12/18/14 11:00
Conductivity $\mu\text{mhos/cm}$ ()	—	Color (Pt-Co) ()	—	Received by:
Dissolved Oxygen ()	—	Cyanide ()	—	[Signature]
Hardness ()	—	Fluoride ()	—	Date/Time:
Moisture % ()	—	Iodide ()	—	12-18-14 11:00
Nitrite ()	—	Nitrate ()	—	Relinquished by:
Oil+Grease ()	—	Nitrate + Nitrite ()	—	[Signature]
Phenol ()	—	pH, S.U. ()	—	Date/Time:
Phosphorus, Total ()	—	Phosphate, Ortho ()	—	12-18-14 3:00 PM
Sect Solids mg/L ()	—	Sect Solids mL/L ()	—	Received by:
Sulfate ()	—	Solids, Total ()	—	[Signature]
Sulfite ()	—	Sulfide ()	—	Date/Time:
TDS ()	—	Surfactant ()	—	12/18/14 3:00 PM
Temperature, °C ()	—	TSS ()	—	Relinquished by:
TOC ()	—	TKN ()	—	[Signature]
Asbestos ()	—	Turbidity ()	—	Date/Time:
TVS ()	—	Carbonate ()	—	12/18/14 3:00 PM
Total Nitrogen ()	—		—	Received by:
2. Metals:				Date/Time:
Aluminum (Al) ()	—	Cadmium (Cd) ()	—	Received by:
Chromium (Cr) ()	—	Copper (Cu) ()	—	Date/Time:
Iron (Fe) ()	—	Lead (Pb) ()	—	12/18/14
Manganese (Mn) ()	—	Mercury ()	—	Relinquished by:
Nickel (Ni) ()	—	Selenium (Se) ()	—	[Signature]
Silver (Ag) ()	—	Tin (Sn) ()	—	Date/Time:
Zinc (Zn) ()	—	Arsenic (As) ()	—	12/18/14
Barium (Ba) ()	—	Boron (B) ()	—	Received by:
Antimony (Sb) ()	—	Beryllium (Be) ()	—	[Signature]
Bismuth (Bi) ()	—	Calcium (Ca) ()	—	Date/Time:
Chromium, VI (CrVI) ()	—	Cobalt (Co) ()	—	12/18/14
Magnesium (Mg) ()	—	Molybdenum (Mo) ()	—	Received by:
Potassium (K) ()	—	Silicon (Si) ()	—	[Signature]
Sodium (Na) ()	—	Strontium (Sr) ()	—	Date/Time:
Thallium (Tl) ()	—	Titanium (Ti) ()	—	12/18/14
Vanadium (V) ()	—	Lithium (Li) ()	—	Received by:
3. RCRA/Hazardous wastes				Date/Time:
Ignitability (Flash Pt.) ()	—	Corrosivity ()	—	Received by:
Reactivity (CN & S) ()	—	TCLP ()	—	Date/Time:
RCRA Metals ()	—	Organics-Pest/Herb ()	—	12/18/14
Organics-BNA ()	—	Organics-VOA ()	—	Relinquished by:
TOX ()	—		—	[Signature]
4. Specific Organics				Date/Time:
Volatiles ()	—	Phenols GC ()	—	12/18/14
Pesticides/PCB's ()	—	Semi-Volatiles (BNA) ()	—	Received by:
Herbicides ()	—	PCB's Only ()	—	[Signature]
BTEX ()	—	TPH 418 I ()	—	Date/Time:
TTO & Dioxin ()	—	TTO ()	—	12/18/14
5. Microbiology				Received by:
Fecal Coliform ()	—	TPH 8015 ()	—	[Signature]
	—	Lindane ()	—	Date/Time:
	—	Total Coliform ()	—	12/18/14
Comments:				Received by:
				[Signature]
				Date/Time:
				12/18/14

Matrix

air ()	water ()	sludge ()
liquid ()	soil ()	solid ()
oil ()	mixed ()	other ()

Specify:

Preservative Codes = PC

- | | |
|---|----------------------------|
| 1. Cool < 6°C | 6. Sodium Hydroxide (NaOH) |
| 2. Sulfuric Acid (H ₂ SO ₄) pH < 2 | 7. Zinc Acetate |
| 3. Nitric Acid (HNO ₃) pH < 2 | 8. Ascorbic Acid |
| 4. Hydrochloric acid (HCl) | 9. FAS |
| 5. Sodium Thiosulfate | 10. Other |

Sample type legend:

grab samples x
composite samples xx

Turnaround time: Sampling Equipment:

- | | |
|------------|-----------------------|
| 1 day () | Automatic Sampler () |
| 2 days () | Sample Pick Up () |
| 3 days () | |
| 5 days () | |

Note: normal turnaround time is ten (10) working days;
additional charges apply for rush orders.

Original



BECKTON ENVIRONMENTAL
LABORATORIES, INC.



REPORT OF ANALYSIS

ATTENTION: Mr. Héctor Ávila
COMPANY: AES Puerto Rico - Guayama

DATE: December 19, 2014

CONTRACT: AES - Guayama

LAB. SAMPLE ID: BEL-1405521
SAMPLE COLLECTED BY: Client (Ávila)
DATE RECEIVED: 12/08/14

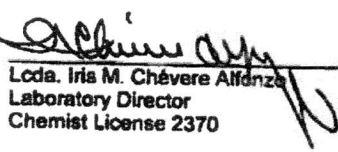
SAMPLE DATE: 12/05/14
TIME: 15:40

DESCRIPTION: Stormwater 002
LAB. FILE ID: 1405521
MATRIX: Water

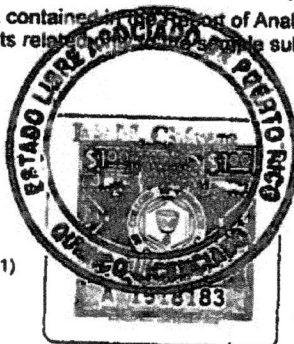
PARAMETER	EPA METHOD	SAMPLE TYPE	UNITS	BEL-1405521 RESULT	METHOD DETECTION LIMIT	ANALYST	DATE ANALYZED
Aluminum	200.7(ICAP)	Grab	mg/L	0.384	0.005	BTR	12/15/14
Iron	200.7(ICAP)	Grab	mg/L	0.063	0.010	BTR	12/15/14
Lead	200.7(ICAP)	Grab	mg/L	<0.001	0.001	BTR	12/15/14
Zinc	200.7(ICAP)	Grab	mg/L	0.026	0.001	BTR	12/15/14

Method Detection Limit (MDL)-The minimum concentration of a substance that can be measured and reported with 99% confidence that the value is above zero.

Certification and release of the data contained in this Report of Analysis has been authorized by the Laboratory Manager or the Manager's Designee. Sample results related to this sample submitted.


Lcda. Iris M. Chévere Alfonzo
Laboratory Director
Chemist License 2370

Attachment: Chain of Custody Records (1)



PAGE 1 OF 1

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REFER OUR SERVICE DEPARTMENT FOR THE CURRENT LIST OF CERTIFIED ANALYSES.
CERTIFIED BY THE STATE OF FLORIDA DEPARTMENT OF HEALTH AND REHABILITATION SERVICES FOR ENVIRONMENTAL TESTING
• CERTIFICATION NUMBER E87556 •
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BECKTON ENVIRONMENTAL LABORATORIES

192 Villa Street • Ponce, P.R. 00730-4875

Tel. 787-841-7373 • Fax 787-841-7313

REVISION 2009

CHAIN OF CUSTODY RECORD

PROJECT NO.	COMPANY	AES GMA.		SAMPLER	Avila
SAMPLE LOCATION/CLIENT ID	Storm Water 002	TIME	15:40 PM	CONTROL NO.	
SAMPLE DATE	12-5-14	BEL NO	1405521		179975

1. General Environmental

Acidity ()	PC	VSS	PC
Ammonia as N ()	—	Alkalinity ()	—
BOD-5 ()	—	Bicarbonate ()	—
Chloride ()	—	Bromide ()	—
COD ()	—	Chlorine, Res. ()	—
Conductivity μ mhos/cm ()	—	Color (ADMI) ()	—
Dissolved Oxygen ()	—	Color (Pt-Co) ()	—
Hardness ()	—	Cyanide ()	—
Moisture % ()	—	Fluoride ()	—
Nitrite ()	—	Iodide ()	—
Oil & Grease ()	—	Nitrate ()	—
Phenol ()	—	Nitrate + Nitrite ()	—
Phosphorus, Total ()	—	pH, S.U. ()	—
Sett Solids mg/L ()	—	Phosphate, Ortho ()	—
Sulfate ()	—	Sent. Solids mL/L ()	—
Sulfide ()	—	Solids, Total ()	—
TDS ()	—	Sulfide ()	—
Temperature, °C ()	—	Surfactant ()	—
TOC ()	—	TSS ()	—
Asbestos ()	—	TKN ()	—
TVS ()	—	Turbidity ()	—
Total Nitrogen ()	—	Carbonate ()	—

2. Metals:

Aluminum (Al) (X) (1.3)	Cadmium (Cd) ()
Chromium (Cr) ()	Copper (Cu) ()
Iron (Fe) (X) (1.3)	Lead (Pb) (X) (1.2)
Manganese (Mn) ()	Mercury (Hg) ()
Nickel (Ni) ()	Selenium (Se) ()
Silver (Ag) ()	Tin (Sn) ()
Zinc (Zn) (X) (1.3)	Arsenic (As) ()
Barium (Ba) ()	Boron (B) ()
Antimony (Sb) ()	Beryllium (Be) ()
Bismuth (Bi) ()	Calcium (Ca) ()
Chromium, VI (CrVI) ()	Cobalt (Co) ()
Magnesium (Mg) ()	Molybdenum (Mo) ()
Potassium (K) ()	Silicon (Si) ()
Sodium (Na) ()	Strontium (Sr) ()
Thallium (Tl) ()	Titanium (Ti) ()
Vanadium (V) ()	Lithium (Li) ()

3. RCRA/Hazardous wastes

Ignitability (Flash Pt.) ()	Corrosivity ()
Reactivity (CN & S) ()	TCLP ()
RCRA Metals ()	Organics-Pest/Herb ()
Organics-BNA ()	Organics-VOA ()
TOX ()	

4. Specific Organics

Volatiles ()	Phenols GC ()
Pesticides/PCB's ()	Semi-Volatiles (BNA) ()
Herbicides ()	PCB's Only ()
BTEX ()	TPH 418.1 ()
TTO & Dioxin ()	TTO ()
	TPH 8015 ()
	Lindane ()

5. Microbiology

Fecal Coliform ()	Total Coliform ()
--------------------	--------------------

Comments:

Sampling Witness:

Date/Time:

Relinquished by:

Date/Time:

Received by:

Date/Time:

Relinquished by:

Date/Time:

Received by:

Date/Time:

Relinquished by:

Date/Time:

Received by:

Date/Time:

Matrix

air ()	water (X)	sludge ()
liquid ()	soil ()	solid ()
oil ()	mixed ()	other ()

Specify:

Preservative Codes = PC

- | | |
|---|----------------------------|
| 1. Cool, <6°C | 6. Sodium Hydroxide (NaOH) |
| 2. Sulfuric Acid (H ₂ SO ₄) pH<2 | 7. Zinc Acetate |
| 3. Nitric Acid (HNO ₃) pH<2 | 8. Ascorbic Acid |
| 4. Hydrochloric acid (HCl) | 9. FAS |
| 5. Sodium Thiosulfate | 10. Other |

Sample type legend:

grab samples	x
composite samples	xx

Turnaround time: Sampling Equipment:

1 day ()	Automatic Sampler ()
2 days ()	Sample Pick Up ()
3 days ()	
5 days ()	

Note: normal turnaround time is ten (10) working days;
additional charges apply for rush orders.

Original



BECKTON ENVIRONMENTAL
LABORATORIES, INC.



REPORT OF ANALYSIS

ATTENTION: Mr. Héctor Ávila
COMPANY: AES Puerto Rico - Guayama

DATE: December 19, 2014

CONTRACT: AES - Guayama

LAB. SAMPLE ID: BEL-1405522

SAMPLE COLLECTED BY: Client (Ávila)

DATE RECEIVED: 12/08/14

SAMPLE DATE: 12/05/14
TIME: 15:50

DESCRIPTION: Stormwater 004

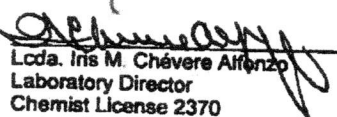
LAB. FILE ID: 1405522

MATRIX: Water

PARAMETER	EPA METHOD	SAMPLE TYPE	UNITS	BEL-1405522 RESULT	METHOD DETECTION LIMIT	ANALYST	DATE ANALYZED
Aluminum	200.7(ICAP)	Grab	mg/L	0.240	0.005	BTR	12/15/14
Iron	200.7(ICAP)	Grab	mg/L	0.244	0.010	BTR	12/15/14
Lead	200.7(ICAP)	Grab	mg/L	<0.001	0.001	BTR	12/15/14
Zinc	200.7(ICAP)	Grab	mg/L	0.016	0.001	BTR	12/15/14

Method Detection Limit (MDL)-The minimum concentration of a substance that can be measured and reported with 99% confidence that the value is above zero.

Certification and release of the data contained in the Report of Analysis has been authorized by the Laboratory Manager or the Manager's Designee. Sample results related to this sample submitted.


Lda. Iris M. Chévere Alfaro
Laboratory Director
Chemist License 2370



Attachment: Chain of Custody Records (1)

PAGE 1 OF 1

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192 Villa Street • Ponce, P.R. 00730-4875

Tel. 787-841-7373 • Fax 787-841-7313

REVISION 2009

CHAIN OF CUSTODY RECORD

PROJECT NO.	COMPANY	AES Gma.		SAMPLER	Arila
SAMPLE LOCATION/CLIENT ID	Stormwater 004		TIME	15:50 AM	CONTROL NO.
SAMPLE DATE	12-5-14		REL. NO.	1K05522	179976

1. General Environmental: PC VSS

Acidity () — Alkalinity () —

Ammonia as N () — Bicarbonate () —

BOD-5 () — Bromide () —

Chloride () — Chlorine, Res () —

COD () — Color (ADMI) () —

Conductivity μ mhos/cm () — Color (Pt-Co) () —

Dissolved Oxygen () — Cyanide () —

Hardness () — Fluoride () —

Moisture % () — Iodide () —

Nitrite () — Nitrate () —

Oil-Grease () — Nitrate + Nitrite () —

Phenol () — pH, S.U. () —

Phosphorus, Total () — Phosphate, Ortho () —

Sett Solids mg/L () — Sett. Solids mL/L () —

Sulfate () — Solids, Total () —

Sulfite () — Sulfide () —

TDS () — Surfactant () —

Temperature, °C () — TSS () —

TOC () — TKN () —

Asbestos () — Turbidity () —

TVS () — Carbonate () —

Total Nitrogen () —

2. Metals: PC

Aluminum (Al) (X) 1.3 Cadmium (Cd) () —

Chromium (Cr) () — Copper (Cu) () —

Iron (Fe) (X) 1.3 Lead (Pb) (X) 1.3

Manganese (Mn) () — Mercury (Hg) () —

Nickel (Ni) () — Selenium (Se) () —

Silver (Ag) () — Tin (Sn) () —

Zinc (Zn) (X) 1.3 Arsenic (As) () —

Barium (Ba) () — Boron (B) () —

Antimony (Sb) () — Beryllium (Be) () —

Bismuth (Bi) () — Calcium (Ca) () —

Chromium, VI (CrVI) () — Cobalt (Co) () —

Magnesium (Mg) () — Molybdenum (Mo) () —

Potassium (K) () — Silicon (Si) () —

Sodium (Na) () — Strontium (Sr) () —

Thallium (Tl) () — Titanium (Ti) () —

Vanadium (V) () — Lithium (Li) () —

3. RCRA/Hazardous wastes

Ignitability (Flash Pt.) () —

Reactivity (CN & S) () —

RCRA Metals () —

Organics-BNA () —

TOX () —

4. Specific Organics

Volatiles () —

Pesticides/PCB's () —

Herbicides () —

BTEX () —

TTO & Dioxin () —

5. Microbiology

Fecal Coliform () —

Corrosivity () —

TCLP () —

Organics Pest/Herb () —

Organics VOA () —

Phenols GC () —

Semi-Volatiles (BNA) () —

PCB's Only () —

TPH 418.1 () —

TFO () —

TPH 8015 () —

Leadene () —

Total Coliform () —

Comments:

Sampling Witness:

Date/Time:

Relinquished by:

Date/Time: 12/8/14 1:18 PM

Received by:

Date/Time: 12-8-14 1:15 PM

Relinquished by:

Date/Time: 12-8-14 2:30 PM

Received by:

Date/Time: 12/8/14 2:38 PM

Relinquished by:

Date/Time:

Received by:

Date/Time:

Matrix

air () water (X) sludge ()

liquid () soil () solid ()

oil () mixed () other ()

Specify:

Preservative Codes = PC

- | | |
|---|----------------------------|
| 1. Cool, <6°C | 6. Sodium Hydroxide (NaOH) |
| 2. Sulfuric Acid (H ₂ SO ₄) pH<2 | 7. Zinc Acetate |
| 3. Nitric Acid (HNO ₃) pH<2 | 8. Ascorbic Acid |
| 4. Hydrochloric acid (HCl) | 9. FAS |
| 5. Sodium Thiosulfate | 10. Other |

Sample type legend:

grab samples x

composite samples xx

Turnaround time: Sampling Equipment:

1 day () Automatic Sampler ()

2 days () Sample Pick Up ()

3 days ()

5 days ()

Note: normal turnaround time is ten (10) working days;
additional charges apply for rush orders.

Original

Appendix 4

**Administrative Compliance Order
AES-PR Coal Fired Power Plant
Docket Number CWA-02-2012-3100**

**Quarterly Visual Assessments
October - December 2014**

AES Puerto Rico, LP
Storm Water Pollution Prevention Plan

MSGP Quarterly Visual Assessment Form

Worksheet No. 6

(Complete a separate form for each outfall you assess)

Name of Facility: AES PR

NPDES Tracking No.

Outfall Name: 003

"Substantially Identical Outfall"? ☐ No ☐ Yes

Person(s)/Title(s) collecting sample: *Hector M. Ariza / Env. Coordinator*

Person(s)/Title(s) examining sample: *Hector M. Ariza / Env. Coordinator*

Date & Time Discharge Began:

*13:25
12/16/14*

Date & Time Sample Collected:

*13:30
12/16/14*

Date & Time Sample Examined:

Note: Samples must be examined within an hour.

*14:00
12/16/14*

Substitute Sample? ☒ No ☐ Yes (identify quarter/year when sample was originally scheduled to be collected):

Nature of Discharge: ☐ Rainfall ☐ Snowmelt

If rainfall: Rainfall Amount: *0.2* inches

Previous Storm Ended > 72 hours
Before Start of This Storm?

☒ Yes

☐ No* (explain):

*On 12/15/14 total rain
was 0.53 but no outfall at
SP-003.*

Parameter

Color ☒ None ☐ Other (describe):

Odor ☒ None ☐ Musty ☐ Sewage ☐ Sulfur ☐ Sour ☐ Petroleum/Gas

☐ Solvents ☐ Other (describe):

Clarity ☒ Clear ☐ Slightly Cloudy ☐ Cloudy ☐ Opaque ☐ Other

Floating Solids ☒ No ☐ Yes (describe):

Settled Solids** ☒ No ☐ Yes (describe):

Suspended Solids ☒ No ☐ Yes (describe):

Foam (gently shake sample) ☒ No ☐ Yes (describe):

Oil Sheen ☒ None ☐ Flecks ☐ Globs ☐ Sheen ☐ Slick

☐ Other (describe):

Other Obvious Indicators of ☐ No ☐ Yes (describe):

Stormwater Pollution

* The 72-hour interval can be waived when the previous storm did not yield a measurable discharge or if you are able to document (attach applicable documentation) that less than a 72-hour interval is representative of local storm events during the sampling period.

** Observe for settled solids after allowing the sample to sit for approximately one-half hour.

Detail any concerns, additional comments, descriptions of pictures taken, and any corrective actions taken below (attach additional sheets as necessary). Insert details

Certification by Facility Responsible Official (Refer to MSGP Subpart 11 Appendix B for Signatory Requirements)

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

A. Name: *Hector M. Ariza*

B. Title: *Env. Coordinator*

C. Signature: *[Signature]*

D. Date Signed: *12/16/14*

AES Puerto Rico, LP
Storm Water Pollution Prevention Plan

MSGP Quarterly Visual Assessment Form

Worksheet No. 6

(Complete a separate form for each outfall you assess)

Name of Facility: AES PR

NPDES Tracking No. *PRR 050265*

Outfall Name: *002* "Substantially Identical Outfall"? ☐ No ☐ Yes

Person(s)/Title(s) collecting sample: *Hector M. Aída / Env. Coordinator*

Person(s)/Title(s) examining sample: *Hector M. Aída / Env. Coordinator*

Date & Time Discharge Began: *15:20*
12/5/14

Date & Time Sample Collected: *15:40*
12/5/14

Date & Time Sample Examined: *16:25*
Note: Samples must be examined within an hour. *12/5/14*

Substitute Sample? ☒ No ☐ Yes (identify quarter/year when sample was originally scheduled to be collected):

Nature of Discharge: ☒ Rainfall ☐ Snowmelt

If rainfall: Rainfall Amount: *0.2* inches Previous Storm Ended > 72 hours ☒ Yes ☐ No* (explain):
Before Start of This Storm?

Parameter

Color ☒ None ☐ Other (describe):

Odor ☒ None ☐ Musty ☐ Sewage ☐ Sulfur ☐ Sour ☐ Petroleum/Gas _____
☐ Solvents ☐ Other (describe):

Clarity ☒ Clear ☐ Slightly Cloudy ☐ Cloudy ☐ Opaque ☐ Other

Floating Solids ☒ No ☐ Yes (describe):

Settled Solids** ☐ No ☒ Yes (describe): *light silt*

Suspended Solids ☒ No ☐ Yes (describe):

Foam (gently shake sample) ☒ No ☐ Yes (describe):

Oil Sheen ☒ None ☐ Flecks ☐ Globs ☐ Sheen ☐ Slick
☐ Other (describe):

Other Obvious Indicators of Stormwater Pollution ☐ No ☐ Yes (describe):

* The 72-hour interval can be waived when the previous storm did not yield a measurable discharge or if you are able to document (attach applicable documentation) that less than a 72-hour interval is representative of local storm events during the sampling period.

** Observe for settled solids after allowing the sample to sit for approximately one-half hour.

Detail any concerns, additional comments, descriptions of pictures taken, and any corrective actions taken below (attach additional sheets as necessary). Insert details

Certification by Facility Responsible Official (Refer to MSGP Subpart 11 Appendix B for Signatory Requirements)

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A. Name: *Hector M. Aída*

B. Title: *Env. Coordinator*

C. Signature: *[Signature]*

D. Date Signed: *12/5/14*

AES Puerto Rico, LP
Storm Water Pollution Prevention Plan

MSGP Quarterly Visual Assessment Form

Worksheet No. 6

(Complete a separate form for each outfall you assess)

Name of Facility: AES PR

NPDES Tracking No. *PRR05BL65*

Outfall Name: *004* "Substantially Identical Outfall"? ☐ No ☐ Yes

Person(s)/Title(s) collecting sample: *Hector M. Ariza / Env. Coordinator*

Person(s)/Title(s) examining sample: *Hector M. Ariza / Env. Coordinator*

Date & Time Discharge Began: *15:20*
12/5/14

Date & Time Sample Collected: *15:50*
12/5/14

Date & Time Sample Examined: *16:20*
12/5/14
Note: Samples must be examined within an hour.

Substitute Sample? ☒ No ☐ Yes (identify quarter/year when sample was originally scheduled to be collected):

Nature of Discharge: ☒ Rainfall ☐ Snowmelt

If rainfall: Rainfall Amount: *0.2* inches Previous Storm Ended > 72 hours ☒ Yes ☐ No* (explain):
Before Start of This Storm?

Parameter

Color ☒ None ☐ Other (describe):

Odor ☒ None ☐ Musty ☐ Sewage ☐ Sulfur ☐ Sour ☐ Petroleum/Gas _____
☐ Solvents ☐ Other (describe):

Clarity ☐ Clear ☐ Slightly Cloudy ☐ Cloudy ☐ Opaque ☐ Other

Floating Solids ☒ No ☐ Yes (describe):

Settled Solids** ☒ No ☐ Yes (describe):

Suspended Solids ☐ No ☒ Yes (describe): *1: the black particles*

Foam (gently shake sample) ☒ No ☐ Yes (describe):

Oil Sheen ☒ None ☐ Flecks ☐ Globs ☐ Sheen ☐ Slick
☐ Other (describe):

Other Obvious Indicators of Stormwater Pollution ☒ No ☐ Yes (describe):

* The 72-hour interval can be waived when the previous storm did not yield a measurable discharge or if you are able to document (attach applicable documentation) that less than a 72-hour interval is representative of local storm events during the sampling period.

** Observe for settled solids after allowing the sample to sit for approximately one-half hour.

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A. Name: *Hector M. Ariza*

B. Title: *Env. Coordinator*

C. Signature: *[Signature]*

D. Date Signed: *12/5/14*